DOCUMENT RESUME

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IDENTIFIERS Orlando Regional Medical Center FL

ABSTRACT

A unique training program in high tech obstetrical, neonatal, and pediatric nursing care areas was designed to be offered on site at Orlando (Florida) Regional Medical/Arnold Palmer Hospital for Children and Women. The training program offered 16 different courses to 355 employees over the 18-month period of the project. A needs assessment was disseminated to employees and newly hired workers were interviewed to determine training needs. Results were used to advise individuals and determine course offerings. Courses were offered on these subjects: (1) cardiac intensive care (neonatal and pediatric patients); (2) when the young die in a high technological environment; (3) minimizing traumatic effects for the child; (4) growth and development in high tech pediatric nursing; (5) advanced technology in adolescent nursing care, neonatal intensive care, pediatric nursing, and pediatric intensive care; (6) critical care concepts for obstetrical nurses; (7) nursing management of high risk pregnancy; (8) fetal monitoring; (9) advanced nursing care in labor and delivery; (10) high tech emergency/trauma nursing; (11) extracorporeal membrane oxygenation; and (12) pediatric nursing chemotherapy technology. (An 11-page report is followed by these attachments: project goals and objectives; course descriptions and objectives; course dates and participant numbers; list of presentations; needs assessment report; brochures and flyers; results of participants' evaluation of the program; independent evaluation report; and example of curriculum materials produced.) (YLB)

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ED336614

FINAL PERFORMANCE REPORT

FY 1990 COOPERATIVE DEMONSTRATON PROGRAM (HIGH TECHNOLOGY CFDA #84.199A)

AWARD NUMBER: V199A00005

RECIPIENT: Valencia Community College
P. O. Box 3028
Orlando, Florida 32811

CONTACT PERSON: Dr. Ruth Webb, Project Director
(407) 299-5000, extension 1565

PROJECT TITLE: A Model Vocational High Technology In Health Care Demonstration Project

FUNDS: Federal - $273,507, Non-Federal - $160,791

AWARD PERIOD: January 1, 1990 - June 30, 1991

TARGET POPULATION: Adult, Postsecondary

FUNDED BY: Office of Vocational and Adult Education,
U. S. Department of Education

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Office of Educational Research and Improvement
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WASHINGTON, D.C. 20202

GRANTS AND CONTRACTS
SERVICE

GRANT AWARD NOTIFICATION

1 RECIPIENT NAME

Valencia Community College

P. O. Box 3028
Orlando, FL 32802

2 PROJECT TITLE

Cooperative Demonstration Program (High Tech.) DTD 07/20/89-A Model Voc., High Tech. In Health Care Demo. Proj.

3 PROJECT STAFF

RECIPIENT PROJECT DIRECTOR	
Dr. Ruth Webb	407-299-5000
EDUCATION PROGRAM STAFF	
Robert L. Miller	202-732-2428
EDUCATION GRANTS STAFF	
LINDA KINNEY	202-732-2563

4 AWARD INFORMATION

PR/AWARD NUMBER	V199A00005
ACTION NUMBER	01
ACTION TYPE	NEW
AWARD TYPE	DISCRETIONARY

5 AWARD PERIODS

BUDGET PERIOD	01/01/90 - 06/30/91
PROJECT PERIOD	01/01/90 - 06/30/91

6 AUTHORIZED FUNDING

THIS ACTION	273,507
BUDGET PERIOD	273,507
PROJECT PERIOD	273,507
RECIPIENT COST SHARE	25%

7 ADMINISTRATIVE INFORMATION

PAYMENT METHOD	ED PMS
ENTITY NUMBER	1-591216316-A1
REGULATIONS	34 CFR 74,75,77,79,80,81,85 34 CFR 412
ATTACHMENTS	ABS

8 LEGISLATIVE & FISCAL DATA

AUTHORITY: Carl D. Perkins Vocational Education Act of 1984
PROGRAM TITLE: Cooperative Demonstration Program (High Technology CFDA 84.199A

APPROPRIATION	FY	CAN	OBJECT CLASS	AMOUNT
91 9/00400	90	E002715	4115	273,507

9 TERMS AND CONDITIONS OF AWARD

THE FOLLOWING ITEMS ARE INCORPORATED IN THE GRANT AGREEMENT:
1) THE RECIPIENT'S APPLICATION (BLOCK 2),
2) THE APPLICABLE EDUCATION DEPARTMENT REGULATIONS (BLOCK 7).

OTHER INFORMATION AFFECTING THIS ACTION IS PROVIDED IN THE ATTACHMENTS SHOWN IN BLOCK 7.

THE RECIPIENT IS REQUIRED TO PAY THE PERCENTAGE OF TOTAL PROJECT COSTS SHOWN IN BLOCK 6.

(Signed) Constance M. Tynes

NOV 2 9

CONSTANCE TYNES
GRANTS OFFICER

DATE

Ver. 1

ED - GCS 007 (11/88)

PLEASE SEE OTHER SIDE FOR MORE INFORMATION

UNITED STATES DEPARTMENT OF EDUCATION
WASHINGTON, D.C. 20202

Dr. Ruth Webb
Valencia Community College
P.O. Box 3028
Orlando, Florida 32802

Re: V199A00005

Dear Dr. Webb:

Congratulations on your grant award from the U.S. Department of Education under the Cooperative Demonstration Program (High Technology). To ensure the best possible communication between our offices, we would like to direct your attention to several areas involving the administration of the grant that you will want to review in detail at this time. The enclosed Grant Award Notification includes information with which you will need to become familiar.

Information relating to contact persons responsible for the grant can be found in Block 3 of the Notification. For your convenience, we have included their telephone numbers. The Education Program Staff contact person is the Project Officer responsible for monitoring activities and addressing programmatic issues arising under the grant. The Education Grants Staff contact person is the Grants Specialist responsible for overseeing the administrative and business-management concerns of the grant. All reports and requests for programmatic and budget revisions must be addressed to the Grants Office.

You will need to review and become familiar with both program regulations and Education Department General Administrative Regulations (EDGAR) cited in Block 7. For information on payment procedures and reporting requirements and other special terms and conditions, please see the attachments referenced in Block 7. In Block 9, you will find additional important information relating to the terms and conditions of the grant. All terms and conditions continue in effect through the project period or until modified or rescinded by the Grants Officer.

It is important to remember that in all communications with the Department of Education you will need to provide us with the PR/AWARD NUMBER found in Block 4. This identifier will facilitate our service to you.

Again, congratulations on your selection for a U.S Department of Education grant. We look forward to a good working relationship with you and your organization.

RECEIVED
DEC 11 1989
HEALTH & PUBLIC SERVICE
VALENCIA COMMUNITY COLLEGE

Sincerely,

Linda A. Kinney

Linda Kinney
Grants Specialist
Research and Demonstration Branch
Grants Division
Grants and Contracts Service

Enclosures

PURPOSE/OBJECTIVES:

The purpose of this project was to demonstrate the design and provision of specialized nursing **vocational** training for a minimum of 244 and a maximum of 644 employees of Orlando Regional Medical Center (ORMC) in order to enable the medical center to implement successfully advanced health care and nursing skills in pediatric, neonatal and obstetric critical care areas. Clearly the medical center was in a state of transformation and needed the specialized nursing training in order to provide the critical care nursing skills in ORMC's new Arnold Palmer Hospital for Children and Women (APH) which opened in September 1989. The training that was provided was developed for the vocational nurse who had graduated from the technical associate degree nursing program and was qualified to take the licensing exam for registered nurse, the licensed practical nurse (LPN), the respiratory therapist and emergency medical technician.

The training supported jobs paying a minimum average wage of $22,880 annually. The project generally made an impact on the local economy through infusion of these wages. The training advanced the nursing care of critically ill patients in pediatric, neonatal and obstetric specialized areas at Arnold Palmer Hospital for Children and Women (APH) and throughout the region. There is no other hospital in the region that provides the level of care provided at APH, therefore, the program was unique in addressing this need in Central Florida.

PROCEDURES

A unique training program was designed to meet the specific vocational training needs of APH utilizing a unit specific needs inventory survey and meeting with health care education personnel and unit managers. Three hundred fifty-five (355) employees trained were provided with a recommended vocational training package consisting of a minimum of one and a maximum of sixteen courses which were offered on site from January 1990 - June 1991. Each course was tailored to the technical equipment and specific nursing specialty of the patient care units at APH.

OUTCOMES:

The project produced 355 highly trained care providers: Associate in Science degree nurses, licensed practical nurses, paramedics and respiratory therapists, who earn an average salary of $22,800 per annum. A model curriculum has been made available to other interested institutions and industry partners. The project has supported the efforts of APH to provide the specialized health care that is of such vital importance to Central Florida and the Southeast, and to pioneer the high technology processes that are transferable to other health care facilities.

Attached is a list of the project goals and objectives. (Attachment A) A narrative description of the activities and accomplishments related to meeting the goals and objectives of the project follows.

GOAL I

The goal was to assist ORMC in enhancing the skills of currently employed nurses in high-risk hospital pediatric, neonatal and obstetrical units in order to foster career advancement. A unique package of nine courses of varying length was offered over a period of time from April, 1990 through June 1991. See attachment B for course names, descriptions and objectives and dates offered. Three of these courses were videotaped in order to allow an increased number of personnel to acquire the knowledge and achieve the skills presented in the courses over a period of time.

A second educational package of two courses was offered during the fall of 1990. These courses met the need of two specialty areas requiring retraining of the associate degree prepared nurse in advanced technical skill. See attachment C for course names, descriptions and objectives and dates offered.

GOAL II

The goal was to assist Orlando Regional in training newly hired nurses in areas of high-risk pediatric, neonatal and obstetric specialized units for infants, children and mothers at risk. A unique package of five courses was offered over the period of January, 1990 through June, 1991. See Attachment D for course names, descriptions, objectives and dates offered. These course offerings allowed the participants to earn while learning. The courses retrained the associate degree nurse to provide the very highly specialized care required in the high-risk setting.

GOAL III

The goal was to assist in providing the human resources needed in the nation and the region to provide advanced nursing care in highly specialized, high-risk health care units. Nine courses that concentrated on specific content related to the highly specialized care required by the patients on the high-risk health care units at Arnold Palmer Hospital were developed. These were offered to the nurses and allied health personnel at the hospital and to the nurses and allied health care personnel in the Central Florida area (see attachment E).

The educational package developed through the partnership of Valencia Community College and Orlando Regional Medical Center was shared at conferences both in the state of Florida and in other regions of the United States (see attachment F).

GOAL IV

The goal was to enable vocationally prepared nurses in Central Florida opportunities to develop and maintain nursing skills in highly specialized areas that enable them to compete successfully at a national level in order to provide advanced nursing care to children and women who are high-risk patients. The educational package developed and offered to the nurses and allied health personnel at Arnold Palmer hospital and in the Central Florida area enabled them to refine their learning and skills in the highly specialized areas. 355 persons from Orlando Regional and 131 persons from Central Florida attended the courses offered (see attachment G).

GOAL V

The goal was to support the introduction of cost-effective, highly specialized nursing procedures and skills that will promote efficiency and productivity. Educational courses for the high-risk pediatric, neonatal and obstetric units at Arnold Palmer Hospital were developed and were designed to be implemented on a continuing basis with minimal change. They were also developed to utilize staff with expertise in the content area to decrease cost of offering the courses on a continuing basis. Attachment H demonstrates participation in a particular course as well as the names of the personnel who contributed to the courses during the 18 months of the grant.

GOAL VI

The goal was to play a catalytic role in economic growth by developing qualified applicants for new positions in nursing for pediatric, neonatal and obstetric specialized hospital units. The turnover rate at Arnold Palmer Hospital was 19% at the beginning of the Grant period. In January 1991, the turnover rate decreased to 13%. The educational opportunities brought in new employees to the specialty units and promoted nurses from within the hospital to a higher level position.

GOAL VII

The goal is to serve as a model cooperative vocational training program that will be replicated by other educational institutions and health care facilities. The educational package of sixteen courses was shared by presentation of papers and poster sessions at national, state and local meetings (see attachment I). Letters offering the detailed plan to implement the project, recommended materials, facilities, equipment, and a recommended training schedule was sent to the vocational education divisions and Technical Education division of the Community Colleges in all fifty states and to Vocational and Community College centers throughout Florida (see attachment J). Thirteen responses have been received and information is being sent according to requested information.

OBJECTIVE I

The objective was to design and provide a unique training program in high tech obstetrical, neonatal and pediatric nursing care areas to be offered on site at Orlando Regional Medical Center/Arnold Palmer Hospital for Children and Women in Orlando, Florida. The training program began Session I, 1990 with four courses offered and 58 employees enrolled and 22 allied health employees from the Central Florida area. The project was well received due to: the quality of the instructors, release time provided to employees, and paid time provided to the newly hired participants who were able to earn while they were refining previous technical learning for the high tech setting. The employer was committed to the space and equipment needed to educate the participants.

Based on the initial assessment of training needs particular to the units targeted for the educational package, sixteen different courses were offered to the employees over the eighteen month period of the grant in the following areas:

Cardiac Intensive Care: The Neonatal Patient
Cardiac Intensive Care: The Pediatric Patient
When the Young Die in a High Technological Environment
Minimizing the Traumatic Effects for the Child
Growth and Development in High Tech Pediatric Nursing
Advanced Technology in Nursing Care of Adolescents
Critical Care Concepts for Obstetrical Nurses
Nursing Management of the High Risk Pregnancy
Fetal Monitoring
Advanced Technology in Neonatal Intensive Care
Advanced Technology in Pediatric Nursing
Advanced Technology in Pediatric Intensive Care
Advanced Nursing Care in Labor and Delivery
High Tech Emergency/Trauma Nursing
Extracorporeal Membrane Oxygenation (ECMO)
Pediatric Nursing Chemotherapy Technology

Attached are copies of course descriptions and enrollment figures by course for Session II 1989-1990 which began in January 1990. (Attachment K)

OBJECTIVE 2

In order to accomplish Objective 2 a Needs Assessment was designed and disseminated to 200 employees. 135 needs assessments were returned. The Orientation Packet of skills specific for the specialty setting was used for new employees. Attachment L is a final report on the assessments.

OBJECTIVE 3

Employees were recommended to take courses offered based on the completed needs assessment. Managers of the units worked with the staff to provide the time to register for and attend the courses that met the individual staff person's need. New employees were interviewed by unit managers utilizing the orientation skill packet as a guide to determine need. Based on the interview process, the unit manager recommended participation in the course designed for new hires.

OBJECTIVE 4

According to the needs assessment courses were offered each term in each area of specialized need. Individuals were advised on which course(s) would most be beneficial to them in their present or future position. Courses such as Advanced Technology in Neonatal Nursing, Cardiac Intensive Care: the Pediatric Patient and Fetal Monitoring were offered to equip Associate Degree nurses, LPN's, RT's and EMT's with the necessary skill level to provide patient care on the specialty high-risk nursing unit.

Courses were offered during hours which were determined as the most optimum time for employees to attend. Some courses were repeated to allow for the greatest number of employees to participate. (see attachment M)

OBJECTIVE 5

As noted in the attached brochure, all sixteen courses were offered during the time period of January 1990 - June 1991. (Attachment N) The employer aided in the development of this notice as well as individual fliers or brochures when courses were offered. See attachment O for examples of the brochures. In addition the employer advertised the courses in their monthly and seasonal advertisements of course offerings.

Instructors, classrooms and preceptors were provided by Arnold Palmer Hospital which contributed greatly to the quality of instruction for all participants. All preceptors providing instruction were prepared in the specialty area and had mastered the competencies taught in the specialty area as well as having preparation in the role of preceptor. Classroom instructors were prepared at the Bachelor's level and most had a Master's degree. All were experienced practitioners in the specialty area in which they taught.

Training materials were provided to each student in each class. The students kept the materials as a resource for use as they functioned on the specialty unit. The on-site coordinator managed the availability of materials, classrooms and clinical practice with the preceptor on the nursing unit.

OUTLINE AND TIMETABLE

During the period of the grant the courses were offered according to a predetermined time schedule.

COURSE	PLANNED	OFFERED
Cardiac Intensive Care: The Neonatal Patient The Pediatric Patient	April 19 and 20, 1990	April 19 and 20 1990
Contact Hours:	12	12
When the Young Die in a High Tech Environment	January 18, 1991	January 18, 1991
Contact Hours:	6	6
Minimizing the Traumatic Effects for the Child	April 27, 1990	April 27, 1990
Contact Hours:	5.5	7
Growth and Development in High Tech Pediatric Nursing	April 25 and 26, 1991	June 24 and 26, 1991
Contact Hours:	10	10
Advanced Care Concepts in Nursing Care of Adolescents	December 7, 1990	December 7, 1990
Contact Hours:	6	6
Critical Care Concepts for Obstetrical Nurses	February 13, 14 and 15, 1991	February 13, 14 and 15, 1991
Contact Hours:	21	21
Nursing Management of High Risk Pregnancy	November 7 and 8 1990 and April 5 and 6, 1991	November 7 and 8, 1990
Contact Hours	12 each offering	12
Fetal Monitoring	June 12 and 13, 1990	June 12 and 13, 1990
Contact Hours:	12	12
Extracorporeal Membrane Oxygenation	May 14-25, 1990 Winter 1991	October 8-26, 1990
Contact Hours:	80 each offering	80

Pediatric Nursing Chemotherapy Technology	October 8, 10, 15, 17, 22 and 24, 1990	October 8, 10, 15, 17, 22 and 24, 1990 November 26, 28, December 3, 5, 10 and 12, 1990
Contact Hours:	10	12 each offering
Advanced Technology Neonatal Intensive Care	January 29, 1990 May 21, 1990 Winter, 1991	January 29, 1990 May 21, 1990 August, 1990 January, 1991
Credit Hours	16 per course	16 per course
Advanced Technology Pediatric Nursing	May 21, 1990 Winter, 1991 10 per course	May 21, 1990 August, 1990 10 per course May 13, 1991
Contact Hours		120
Credit Hours		
Advanced Technology Pediatric Intensive Care	September 10, 1990	January 21, 1991
Contact Hours	75	75
Advanced Nursing Care in Labor and Delivery	May 21, 1990 Winter, 1991	May 21, 1990 October, 1990 March, 1991
Credit Hours	16	16 May 1990
Contact Hours		80 October 1990 and March 1991
High Tech Emergency/ Trauma Nursing	April 9, 1990	August 1990
Contact Hours	6	24

OBJECTIVE VI

State of the art facilities were provided by Arnold Palmer Hospital. The classrooms for the classes were convenient to the staff as they were located in the Health Education Department of the hospital. Equipment for the classroom setting was available in the department. The specialty, high- risk neonatal, pediatric and obstetric units are equipped with with state of the art equipment to provide the high level of care that is delivered to the high-risk patients admitted from Central Florida and in some cases the southeast region. Students work in the patient settings with a preceptor as part of the course work.

EVALUATION

The project received constant evaluation by the project director, the training coordinator from industry, the Project and Nursing Advisory Committee of Valencia Community College, and Orlando Regional Medical Center Health Education management. The program was evaluated by those who participated in the educational process. (See attachment P) An independent evaluator, Ms. Jo Manion, Administrator of the Center for the Promotion of Nursing with the Florida Hospital Association performed an on-site review in June 1991. (See attachment Q) Attachment R is an example of curriculum materials produced in support of this project.

ATTACHMENT A

Goals established for the project:

Goal I To assist Orlando Regional in enhancing the skills of currently employed nurses in high-risk hospital pediatric, neonatal and obstetrical units in order to foster career advancement.

Goal II To assist Orlando Regional Hospital in training newly hired nurses in areas of high-risk pediatric, neonatal and obstetric specialized units for infants, children and mothers at risk.

Goal III To assist in providing the human resources needed in the nation and the region to provide advanced nursing care in highly specialized, high risk health care units.

Goal IV To enable Central Florida nurses opportunities to develop and maintain nursing skills in highly specialized areas that enable them to compete successfully at a national level in order to provide advanced nursing care to children and women who are high-risk patients.

Goal V To support the introduction of cost-effective, highly specialized nursing procedures and skills that will promote efficiency and productivity.

Goal VI To play a catalytic role in economic growth by developing qualified applicants for new positions in nursing for pediatric, neonatal and obstetric specialized hospital units.

Goal VII To serve as a model cooperative vocational training program that will be replicated by other educational institutions and health care facilities.

In order to accomplish these goals, the following objectives were established:

Objective 1

To design and provide a unique training program in Pediatric, Neonatal and Obstetric Nursing care to be offered on site at Orlando Regional in Orlando, Florida beginning January 2, 1990.

Objective 2

To assess the training needs of the 244 employees and new hires who will provide pediatric, neonatal and obstetric nursing care at Orlando Regional.

Objective 3

To prescribe a training package for 244 current and new employees.

Objective 4

To incorporate into each training package a minimum of one and a maximum of sixteen courses (tailored to the specialized units utilized at Orlando Regional) chosen from those listed.

1. Advanced Technology in Neonatal Intensive Care
2. Neonatal Cardiac Intensive Care
3. Extracorporeal Membrane Oxygenation
4. Advanced Technology in Pediatric Intensive Care
5. Advanced Technology in Pediatric Intensive Care
6. Pediatric Nursing Chemotherapy Technology
7. Pediatric Cardiovascular Technology Nursing
8. When the Young Die in a High Technology Environment
9. Minimizing the Traumatic Effects of Trauma on Children
10. Growth and Development in High Tech Pediatric Nursing
11. Advanced Technology in Nursing Care of the Adolescent
12. Critical Care Concepts for Obstetric Nurses
13. Nursing Management of High Risk Pregnancy
14. Fetal Monitoring High Tech Obstetric Nursing
15. Advance Nursing Care in Labor and Delivery
16. High Technology Trauma Nursing

Objective 5

To offer each of the sixteen courses a minimum of one and a maximum of four times during the January 1990 - June 1991 period.

Objective 6

To utilize resources provided by Orlando Regional and Valencia Community College in designing and offering the training.

ATTACHMENT B

Course: Cardiac Intensive Care*
The Neonatal Patient
The Pediatric Patient

Data: April 19 and 20, 1990

Attendance: 35

Course Description:

As part of our commitment of professional excellence, the Arnold Palmer Hospital for Children and Women and the Valencia Community College Nursing Program are providing this course to prepare the neonatal nurse, the pediatric/pediatric ICU nurse, and the respiratory therapist to care for the young cardiac patient.

Course Objectives:

At the completion of this program the participants will be able to:

1. Identify the common congenital heart lesions.
2. Discuss post catherization care of the neonatal or pediatric patient.
3. Explain hemodynamic monitoring of the neonatal and pediatric patient.
4. Assess the newborn patient pre-operatively.
5. Discuss the pharmacological support of the cardiac patient.
6. Differentiate between cardiogenic shock and hypovolemic shock.

*(Videotape available: see copy of tapes sent with this report)

Course: Minimizing the Traumatic Effects for the Child
"A Child's Hospitalization"

Date: April 27, 1990

Course Description:

Valencia Community College Nursing Program and The Arnold Palmer Hospital for Children and Women have designated a program related to minimizing the traumatic effects of hospitalization on the child. The target audience is the health care person who provides care to the hospitalized child.

This unique program is formulated to enhance the knowledge of health care personnel concerning the acutely ill child's perception of hospitalization. Emphasis will be to explore the effects of hospitalization on the child.

Course Objectives:

At the end of the program, the participant will be able to:

1. Recognize ways to alleviate the child's fears of the hospital experience.
2. Identify the behaviors of the child who signals stress.
3. Recognize the needs of siblings.
4. Explore ways of effective communication with children and adolescents.
5. Recognize the role of play for the child.
6. Experience the frustrations of the hospitalized child.
7. Recognize the value of parents at the bedside.

Course: Fetal Monitoring

Date: June 12 and 13, 1990

Course Description:

As part of our commitment to excellence in providing patient care Arnold Palmer Hospital and Valencia Community College are providing an educational program in Fetal Monitoring. The target audience is the nurse preparing to work in the labor and delivery area or presently working in this area needing to upgrade their skills.

Course Objectives:

Upon completion of this program, the participant will be able to:

DAY 1

1. Identify principles related to Electronic Fetal Heart Rate Monitoring.
2. Define Fetal Heart Rate variability.
3. Discuss characteristics of Intrapartal Fetal Heart Rate patterns and associated nursing care.
4. Differentiate methods of antepartum testing and their use for Fetal Surveillance.

DAY 2

1. List strategies to minimize legal liability associated with Electronic Fetal Monitoring.
2. Define physiological components of Uteroplacental Blood Flow.
3. Recognize implications for Umbilical Cord Blood Gas analysis.
4. Discuss management of Complex Fetal Heart Rate patterns and pitocin administration.

Course: Nursing Management of the High Risk Pregnancy

Date: November 7 and 8, 1990

Course Description:

This program will focus on the multidisciplinary team approach to the assessment and management of the high risk pregnancy. Content will include high risk situations such as hyperemesis gravidarum, diabetes, PIH, premature labor, and other medical disorders. Current assessment methodologies such as biophysical profile, NST, CST, OCT, ultrasound and amniotic fluid studies will be discussed.

Course Objectives:

Upon completion of this program, the participant will be able to:

1. Define a high risk pregnancy.
2. Discuss in detail specific assessment techniques utilized to diagnose a high risk pregnancy.
3. Identify the role of the nurse in assessing a high risk pregnancy.
4. Interpret the results of specific assessment techniques.
5. Discuss the educational needs of the high risk antepartum patient.
6. Identify the nurses role in implementing care to meet the physical, psychosocial and emotional needs of the woman whose pregnancy is complicated by medical problems or conditions.

Course: Nursing of Adolescents in a High-Tech Setting

Date: December 7, 1990

Course Description:

Arnold Palmer Hospital and Valencia Community College have designed a program directed toward meeting the psychosocial needs of the hospitalized adolescent.

This program is formulated to enhance the knowledge of health care personnel in the area of adolescent growth and development, their reaction to hospitalization and nursing interventions to facilitate the development and adaptation of the chronically or acutely ill adolescent in a high-tech setting.

Course Objectives:

1. Identify and analyze the developmental tasks of the adolescent period (self, family, social, intellectual, moral, career, etc.)

2. Recognize specific problems related to hospitalization of the adolescent.

3. Discuss communication techniques for the promotion of a successful nurse - adolescent - family relationship.

4. Describe the effects of hospitalization and illness on the adolescent client and his family.

Course: When the Young Die in a High-Tech Setting*

Date: January 18, 1991

Course Description:

This program is designated to assist nurses and other members of the health care team to gain an insight into the process of dying in a high-tech setting.

Emphasis will be placed on cultural and religious aspects that influence families perceptions. The conference will also deal with the sequelae of child abuse, perceptions and decisions related to organ donation and transplant and ethical issues related to the quality of life.

Course Objectives:

The participant will be able to:

1. Recognize nurse's role when working with the abused child and his or her family.
2. Gain insight into the diverse behavior related to dying as influenced by cultural and religious beliefs.
3. Examine ethical issues related to quality of life in the high-tech environment.
4. Discuss the perceptions and decisions facing families concerning organ donation and transplant.

* (Videotape available: see copy of tapes sent with this report)

Course: Critical Care Concepts for OB Nurses

Date: February 13, 14 and 15, 1991

Course Description:

This advanced course will prepare obstetric nurses to provide care for critically ill mothers during antepartum, intrapartum, and immediate post-partum. Interpretation of ECG's, ABG's and hemodynamic monitoring will be included, in addition to post anesthesia recovery nursing interventions. Participants will have an opportunity for a "hands on" learning lab experience to set up, calibrate and interpret machine readings.

Course Objectives:

The participant will be able to:

1. State current management strategies for the high-risk obstetrical patient.
2. Discuss nursing care for the high-risk post-operative patient.
3. Explain the principles of hemodynamic monitoring.
4. Demonstrate the ability to perform specific critical care skills.
5. Develop plans of care for the patient with HELLP Syndrome, DIC and Hypertensive disorders.

Course: Growth and Development in High-Tech Nursing

Date: June 24 and 26, 1991

Course Description:

This course is designed to provide new and experienced nurses with the advanced technical knowledge required to address the developmental issues of children. Emphasis will be placed on dealing with the developmental issues of acute and chronically ill infants through adolescents.

Course Objectives:

At the end of this course the learner will be able to:

1. Discuss the effect of acute and chronic illness on the growth and development of the infant through adolescent.
2. Recognize adaptions of nursing care based on the effects of acute or chronic illness on growth and development.
3. Utilize the health care team to plan nursing interventions which can be implemented in the hospital setting to promote achievement of developmental tasks from infancy through adolescence.

ATTACHMENT C

Course: Extracorporeal Membrane Oxygenation (ECMO)

Date: October 1990

Course Description:

This course will emphasize the knowledge and skills to care for the neonate requiring ECMO.

Course Objectives:

1. Discuss the history of ECMO.
2. Explain the mechanics of the oxygenator used in the ECMO circuit.
3. State the function of the heat exchanger and bladder box/controller.
4. Discuss newborn respiratory physiology as it relates to ECMO.
5. List the criteria established for patient selection.
6. Explain the process of coagulapathy.
7. Discuss SVO2 monitoring.
8. Calculate a heparin drip per protocol.
9. Explain ACT monitoring including normal parameters for the patient on ECMO.
10. State the role of the ECMO specialist during cannulation.
11. Demonstrate hemofiltration.
12. List the indications for hemofiltration.
13. Discuss management of the patient on ECMO.
14. Demonstrate the skills associated with circuit emergencies.
15. Perform an ACT per protocol.

Course: Pediatric Nursing Chemotherapy Technology*

Date: 1) October 8, 10, 15, 17, 22, 24
2) November 26, 28, December 3, 5, 10, 12

Course Description:

This course focuses on increasing the nurses' knowledge of Pediatric Oncology in order to enhance the quality of care for these children. The major emphasis will be on the administration of chemotherapy and nursing considerations.

Course Objectives:

Upon successful completion of this program, the participant will be able to:

1. Discuss basic cancer concepts.
2. Review the most common cancers affecting pediatric patients.
3. Differentiate the major treatment modalities.
4. Identify the four (4) classifications of chemotherapy.
5. Discuss the ORMC "Pediatric Oncology Program" identifying the importance of various treatment modalities relating to the common cancers in children.
6. Explain the differences in the chemotherapy drugs used in the treatment of pediatric oncology patients, listing the dosages, action, side effects and precautions in administration.
7. Safely administer the chemotherapy drugs, recognizing toxicity and intervening appropriately.
8. Evaluate the role of the Pediatric nurse in providing optimum care, patient/family education, nutritional support and home care.

*(Videotapes available: see copy of tapes sent with this report)

ATTACHMENT D

Course: Advanced Technology in Neonatal Intensive Care

Date:
January, 1990
May, 1990
August, 1990
January 1991

Course Description:

This program designated for graduate and registered nurses will provide the advanced knowledge necessary for the care of the moderate to hi-risk neonate. Anatomy, physiology and pathophysiology of the cardiac, pulmonary, neurologic, renal and hemopoietic systems will be discussed in detail. Clinical instruction focuses on assessment, skills, use of ventilators, maintenance of central lines, care of chest tubes, hemodynamic monitoring, administration of vasopressor medication, and neonatal resuscitation. It is designed to provide the nurse without neonatal experience the knowledge and skills necessary for neonatal nursing care. The nurse with experience will be familiar with the policy and procedures of our institution.

Course Objectives:

Upon successful completion of the course, the nurse participant will be able to:

1. Demonstrate a head-to-toe assessment of the newborn in the delivery/room admissions nursery.
2. Utilize the neonatal documentation tools.
3. Describe common congenital malformations noted during the assessment (including Down's Syndrome, Trisomy 13, Trisomy 18, myelomeningocele, imperforate anus, and tracheoesophageal fistula).
4. State the multisystem effects of asphyxia on the newborn.
5. Demonstrate the nursing responsibility regarding fluid therapy initiation and maintenance including the recognition of abnormal laboratory values.
6. Utilize the nursing process in the care of the neonatal patient by assessing, planning, implementing and evaluating the neonate with:
    a. respiratory dysfunction
    b. gastrointestinal dysfunction
    c. cardiac dysfunction
    d. hematologic dysfunction
    e. renal
    f. neurologic dysfunction
    g. sensory impairment
    h. musculoskeletal dysfunction

    i. skin disorders
    j. metabolic dysfunction
    k. psychophysiologic dysfunction
    l. chronic illness
    m. infectious disorders

7. Define and discuss the clinical diagnosis and nursing management of the infant with congenital heart disease.

8. Explain the pathophysiology of the neonate with Respiratory Distress Syndrome.

9. Demonstrate the management of the neonate with meconium aspiration in the delivery room.

10. Discuss nursing management of the infant with persistent pulmonary hypertension.

11. Differentiate between pneumonia and respiratory distress syndrome.

12. State the four grades of intraventricular hemorrhage (IVH) and discuss methods that may decrease the risk of IVH.

13. Demonstrate care of the neonate with necrotizing enterocolitis.

14. Utilize monitoring equipment accurately and safely (i.e. cardiorespiratory, Tcpo2, blood pressure, oximeter, dinamap blood pressure, and hematocrit machine).

15. Correctly administers pharmacologic agents to the neonate, identifying the indications, precautions and side effects of the drug.

16. Administer and monitor drugs on constant infusion pumps. (i.e. Epinephrine, Dopamine, Priscoline and Amphotericin).

17. Demonstrate ability to follow NICU guidelines and protocols for the resuscitation of an infant.

18. Assist physician or a nurse in the performance of the following procedures: insertion of an umbilical or arterial or venous line, insertion of chest tubes, intubation of the trachea, exchange transfusion, circumcision, or septic work-up.

19. Demonstrate ability to provide teaching and support to the families of infants in the NICU in conjunction with the family support staff and other members of the health care team.

20. Identify growth and developmental needs of the premature infant or sick term infant.

21. Establish priorities for patient care activities based upon acuity and patient/family needs.

22. State rationale for priorities and clinical decisions based on scientific principles and NICU policies and procedures.

23. Communicate effectively with the families of the high-risk neonate.

Course: Advanced Technology in Pediatric Nursing

Date: May, 1990
August, 1990
May, 1991

Course Description:

This course is a comprehensive study of the pediatric patient and family. The course focuses on physiological, developmental, and psychological responses of the ill child. It is designed to provide the nurse without Pediatric experience the knowledge and skills necessary for child health nursing.

Course Objectives:

Upon successful completion of the course, the nurse participant will be able to:

1. Integrate nursing knowledge and assessment in the care of the sick child through demonstration of the unit competency list.
2. Demonstrate an understanding of ORMC policy and procedure guidelines as reflected through clinical performance.
3. Utilize the pediatric documentation tools.
4. Apply knowledge of safety measures and equipment necessary in caring for children of all age groups as reflected by clinical performance.
5. Demonstrate an understanding of child and family development as evidenced by observation of interpersonal and communication skills.
6. Identify growth and development needs of the infant, child and adolescent by incorporating those needs into the plan of care.
7. Demonstrate knowledge of I.V. and medication therapy including I.V. insertion and maintenance.
8. Identify anatomical, physiological, psychological, cognitive and social characteristics of young children and their implications for nursing.
9. Identify the pathophysiology of the selected pediatric patient by incorporating the knowledge into the plan of care.
10. Utilize the nursing process in the care of the pediatric patient by assessing, planning, implementing and evaluating the child with:
    a. respiratory dysfunction
    b. gastrointestinal dysfunction
    c. cardiac dysfunction
    d. hematologic dysfunction

    e. renal dysfunction
    f. neurologic dysfunction
    g. sensory impairment
    h. musculoskeletal dysfunction
    i. skin disorders
    j. metabolic dysfunction
    k. psychophysiologic dysfunction
    l. chronic illness
    m. infectious disorders

11. Correctly administer pharmacologic agents to the pediatric patient, identifying the indications, precautions and side effects of the drug.

12. Provide for the emotional and psychosocial needs of the pediatric patient and family.

13. Demonstrate therapeutic child life and play interventions appropriate for each age group of the pediatric patient.

14. Identify and utilize patient teaching tools and resources available to meet the needs of the patient and family.

Course: Advanced Nursing Care in labor and Delivery

Date: June, 1990
October, 1990
March, 1991

Course Description:

The emphasis of this course is on anatomical, physiological and pathophysiological adaptations during the intrapartal period in a high-tech environment. Nursing management of the labor patient is the primary focus and application of these concepts.

Course Objectives:

Upon successful completion of this course, the nurse participant will be able to:

1. Discuss normal anatomical, physiological and emotional alterations occurring throughout perinatal process.
2. Describe current antepartum screening and testing techniques and their nursing implications.
3. Discuss individualized family centered care as it relates to the childbearing family.
4. Differentiate complications of pregnancy, including etiology, signs and symptoms, medical management, prognosis and nursing implications.
5. Identify normal as well as abnormal electronic fetal monitoring patterns and appropriate nursing interventions.
6. Discuss infection control techniques utilized in labor and delivery and the rationales for their use.
7. Describe the legal responsibilities in providing care to the perinatal patient and the documentation of such.
8. Perform and document a physical assessment of a mother in the intrapartum period.
9. Recognize pharmacological agents commonly used to treat pregnancy complications including possible side effects and nursing management.
10. Discuss analgesia/anesthesia options available during labor and/or delivery and the nursing management.
11. Identify the indications for Cesarean birth including the physiological and the psychological implications for the childbearing family.

12. Describe the non-invasive and invasive methods of hemodynamic monitoring including potential risks and nursing implications.

13. Demonstrate the ability to perform in a perinatal code and neonatal code.

14. Recognize possible complications of the patient in the immediate postpartum period and their nursing implications.

15. Explain the implications of perinatal loss upon the childbearing family and demonstrate appropriate nursing care to promote the grieving process.

16. Utilizing the nursing process, develop comprehensive, individualized nursing care plans for the childbearing family during intrapartum.

SKILLS OBJECTIVES

Upon completion of the course the nurse participant will successfully complete the competencies in the orientation summary: Labor/Delivery

1. Comply with safety and emergency procedures consistent with hospital policy.

2. Perform the duties of a unit secretary as necessary to promote patient care consistent with hospital policy and procedure.

3. Comply with personnel policies of the area of clinical assignment and the institution.

4. Comply with the philosophy, goals, and objectives of the area of clinical assignment and institution.

5. Perform nursing procedures required by the area of clinical assignment consistent with scientific principles and hospital policy and procedure.

6. Perform unit specific nursing procedures and use equipment required by the area of clinical assignment consistent with scientific principles and hospital policy and procedure.

7. Use equipment required for implementation of patient care consistent with operating instructions, safety regulations and policy and procedure.

8. Comply with all policies and procedures and scientific principles in the administration of drugs, intravenous fluids, and blood products.

9. Documents on forms in the medical record consistent with the policy and procedure, defined standards of care, and the quality assurance program.

10. Uses resource persons and departments for patient care based on specific needs and the availability and responsibility of the resource.

11. Performs the role of primary nurse based on the needs and standards of the clinical area of assignment and hospital policy and procedure.

12. Provides nursing care consistent with unit policy and procedure to patients with the conditions listed in the summary.

13. Provides patient education with appropriate documentation, consistent with hospital policy and procedure.

Course: Emergency Trauma

Date: August 1, 1990 - September 9, 1990

Course Description:

The Emergency Trauma Course is a comprehensive course that focuses on the emergency management of the ill/injured adult/pediatric patient in the emergency department.

The course provides classroom lectures with optional clinical experiences that emphasize the role of the nurse as an integral part of the emergency/trauma team.

Course Objectives:

At the end of this program, the participant should be able to:

1. Perform the initial assessment of an emergency patient.
2. Determine priorities of care.
3. Plan for the care of the ED patient including appropriate nursing diagnosis.
4. Analyze the pathophysiologic changes related to key signs and symptoms.
5. Determine patient classifications based on needs and resources for triage.
6. Recognize the importance of standing orders and patient education.
7. Prioritize and perform care of the multiple trauma patient.

Course: Advanced Technology in Pediatric Intensive Care

Date: January, 1991

Course Description:

This course designed for graduate and registered nurses will provide the advanced knowledge necessary for the care of children in the Pediatric ICU. Emphasis will be placed on pediatric assessment and intervention. A systems approach will provide a background of anatomy, physiology, pathophysiology, pharmacology and technology needed to function in the Pediatric ICU. Skills labs will be directed at assessment and technical skills specific to the critically ill child. This course is designed to provide the nurse without pediatric critical care experience, the knowledge and skills necessary to practice in the Pediatric ICU. The nurse with experience will become familiar with the policies and procedures specific to our Pediatric ICU.

Course Objectives:

Upon successful completion of the course, the nurse will be able to:

1. Perform a comprehensive head-to-toe assessment of the critically ill child.
2. Utilize Pediatric ICU documentation tools.
3. Identify growth and development needs of the Pediatric ICU patient and incorporate these needs into their care.
4. Safely operate equipment necessary for the care of the critically ill child.
5. Utilize the nursing process by assessing, planning, implementing and evaluating the child with:
    a. respiratory dysfunction
    b. cardiovascular dysfunction
    c. GI dysfunction
    d. renal dysfunction
    e. metabolic dysfunction
    f. Heme/ONC dysfunction
    g. neurological dysfunction
    h. musculoskeletal dysfunction
    i. infectious process
6. Demonstrate the nursing responsibility regarding fluid therapy initiation and maintenance, including the recognition of abnormal laboratory values.
7. Correctly administers pharmacologic agents to the child, identifying the indications, precautions and side effects of the drug.

8. Exhibit proficiency in initiating a Code-45 and follow PALS guidelines in an arrest situation.

9. Describe the assessment and management of pediatric trauma in the acute phase as a systems approach.

10. Explain the roles of the following support services

    a. Clergy
    b. Child Life
    c. Occupational and Physical Therapy
    d. Social Services

11. Define and discuss the clinical diagnosis and nursing management of the child with congenital heart disease.

12. Describe the nursing management and presentation of neurological impairment peculiar to children.

13. Differentiate between airway management of the child with adequate ventilatory effort and that of inadequate ventilatory effort.

ATTACHMENT E

Courses offered to Arnold Palmer Hospital personnel and Central Florida nurses and Allied Health personnel.

1. Cardiac Intensive Care: The Neonatal Patient - The Pediatric Patient.
   12 hours of class
2. When the Young Die in a High-Tech Environment.
   6 hours of class
3. Minimizing the Traumatic Effects for the Child.
   7 hours of class
4. Growth and Development in High-Tech Pediatric Nursing.
   12 hours of class
5. Advanced Technology in Nursing Care of Adolescents.
   6 hours of class
6. Critical Care Concepts for Obstetrical Nurses.
   21 hours of class
7. Nursing Management of the High Risk Pregnancy.
   12 hours of class
8. Fetal Monitoring.
   12 hours of class
9. High-Tech Emergency/Trauma Nursing.
   24 hours of class

ATTACHMENT F

Dissemination of project at conferences or meetings.

1. January 3, 1991
   Faculty Development Conference, Orlando, Florida (Joanne Wit)
2. February 28, 1991
   Florida League for Nursing, State Conference, Tampa, Florida (Joanne Wit)
3. March 6-9, 1991
   Maternal Child Nursing Convention, New Orleans, Louisiana (Joanne Wit, Anne Peach)
4. June 29, 1991
   Nursing Education '91, Boston, Massachusetts (Joanne Wit)
5. July 21-24, 1991
   ASHET, Salt Lake City, Utah (Anne Peach, Connie Bueker)
6. Throughout grant period, Deans and Directors of Schools of Nursing - Florida (Anne Miller)
7. Throughout grant period, Level III Review (review of nursing education in the state of Florida) (Ruth Webb)

ATTACHMENT G

GRANT COURSES

Course	Date	Participants ORMC/APH	Other
Session II, 1990			
Neonatal Intensive Care	1/90 - 3/90	10	0
Minimizing the Traumatic Effects on the Child	4/27/90	15	22
Cardiac Intensive Care Neonatal and Pediatric	4/19 & 20/91	35	0
Session V, 1990			
Neonatal Intensive Care	5/90 - 8/90	10	0
Advance Care in Labor and Delivery	5/90 - 7/90	10	0
Pediatric Nursing	5/90 - 7/90	7	0
Fetal Monitoring	6/12 & 13/90	29	44
Emergency Trauma Nursing	8/90 - 9/90	55	6
Pediatric Nursing	8/90 - 9/90	5	0
Neonatal Intensive Care	8/90 - 11/90	8	0
Session I, 1990			
Chemotherapy	10/90 - 11/90	15	0
Advanced Care/Labor and Delivery	10/90 - 11/90	4	0
ECMO	10/90	10	0
Nursing Management High Risk Pregnancy	11/7 & 8/90	29	23
Chemotherapy	11/90 - 12/90	7	0
Advanced Technology in Nursing Care of Adolescents	12/7/90	7	9

Course	Date	Participants ORMC/APH	Other
Session II, 1991			
Neonatal Intensive Care	1/91 - 3/91	8	0
When the Young Die in a High Tech Environment	1/18/91	6	6
Pediatric Intensive Care	1/91 - 4/91	19	0
Critical Care Concepts for Obstetrical Nurses	2/13,14 & 15/91	13	14
Advanced Care/Labor and Delivery	3/90 - 4/90	7	0
Session IV, 1991			
Pediatric Nursing	5/90 - 6/90	9	0
Growth and Development in High Tech Pediatric Nursing	6/90	17	7
	TOTAL	355	131

kbm 4/91

ATTACHMENT H

PEDIATRIC SPECIALTY COURSE

WEEK I

Monday, May 13, 1991

CLASS 1

Classroom 4

8:00 - 9:30 a.m.	Introduction	B. Krygier
9:45 - 10:45 a.m.	Pretest	
10:45 - 11:45 a.m.	Pediatric Orientation (video)	
11:45 - 12:15 p.m.	Lunch	
12:15 - 1:00 p.m.	Math Review	B. Krygier
1:00 - 1:50 p.m.	Medications	Mike Heinrich
2:00 - 2:30 p.m.	IV Administration (AVI & Med Fusion Pump)	Be Schaufauser
2:30 - 2:45 p.m.	Break	
2:45 - 4:30 p.m.	Medication Documentation, Dilantin, and Policies related to the above	

PEDIATRIC SPECIALTY COURSE
WEEK I
Tuesday, May 14, 1991

CLASS 2
Tower 2 Conference Room

8:00 - 9:15 a.m.	Medication Math Test	
9:15 - 9:30 a.m.	Break	
9:30 - 10:00 a.m.	KCL and Blood Policies	Be Schafauser
10:00 - 10:30 a.m.	Blood: A Precious Commodity (video)	
10:30 - 11:30 a.m.	Skills and Policies related to the above	Be Schafauser
11:30 - 12:00 p.m.	Lunch	
12:00 - 12:45 p.m.	Venipuncture for Lab and IV	B. Krygier Rachael Leware
12:45 - 1:15 p.m.	Lab Forms	
1:15 - 1:30 p.m.	Break	
1:30 - 2:30 p.m.	Fluid and Electrolytes	B. Krygier
2:40 - 4:30 p.m.	Lab Values for Pediatric Patient	Diana Smith

PEDIATRIC SPECIALTY COURSE
WEEK I
Wednesday, May 15, 1991

CLASS 3
Tower 2 Conference Room

8:00 - 9:00 a.m.	Newborn Assessment (Video)	
9:00 - 10:00 a.m.	Pediatric Head to Toe Assessment (Adaptation for Age)	B. Krygier
10:00 - 10:15 a.m.	Break	
10:15 - 11:30 a.m.	Admission and Discharges	Cathy Logan
11:30 - 12:00 p.m.	Lunch	
12:00 - 1:45 p.m.	Nursing Process	Be Schafauser
1:45 - 2:00 p.m.	Break	
2:00 - 3:00 p.m.	Care of HIV Infected Children (Video)	
3:00 - 4:00 p.m.	Review on units of: Temperature, denemap, diaper scale, bili light, Gebby light, wheelchair, wagons, cribs, isolettes, pulse oximeter, AB monitor, beds: polices	Diana Smith

PEDIATRIC SPECIALTY COURSE
WEEK I
Thursday, May 16, 1991

CLASS 4
Tower 2 Conference Room

8:00 - 8:15 a.m.	A Child's Reaction to the Hospital (video)	
8:15 - 9:15 a.m.	Patient/Parent Education	Al Vigo
9:15 - 9:30 a.m.	Break	
9:30 - 10:30 a.m.	Preparing the Pediatric Patient for Procedures	Linda Jones
10:30 - 11:30 a.m.	Child Life (video)	
11:30 - 12:00 p.m.	Lunch	
12:00 - 12:30 p.m.	Infection Control	Sharon Cooper
12:30 - 1:30 p.m.	Safety Needs	B. Krygier
1:30 - 2:00 p.m.	Patient Care Model (video)	
2:00 - 2:15 p.m.	Break	
2:15 - 3:15 p.m.	Evaluating Children (video)	
3:15 - 4:30 p.m.	Risk Management/Quality Assurance	Carol Paris Diana Smith

PEDIATRIC SPECIALTY COURSE
WEEK I
Thursday, May 17, 1991

CLASS 5
Tower 2 Conference Room

8:00 - 8:30 a.m.	Board Assignment	T_7
8:30 - 9:30 a.m.	Computer, Telephone and Patient Call System	
9:30 - 9:45 a.m.	Break	
9:45 - 11:30 a.m.	Scavenger Hunt and Code Cart	T_6 & T_7
11:30 - 12:30 p.m.	Lunch	
12:30 - 2:00 p.m.	Respiratory Therapy	
2:00 - 3:00 p.m.	Medication and Digoxin Review	
3:00 - 3:45 p.m.	Tour Recovery Room with Linda Jons	
3:45 - 4:30 p.m.	Medication Review (Con't)	

Jo Kel
Patsy Kelly
Terry Kelly
Barbara Kersey
Lori Kittsley
John Klaers
Dolores Korth
Barbara Krygier
Brenda Lanaris
Diane Lanford
Dr. Arnold J. Lazar
Brian Lipman
Sheryl Logan
Marie Lombardi
Dr. Frank Lopez
Carol Ludwig
Dr. Robert Maniello
Loretta Marino
Terry Marshal
Nancy Matthews
Amanda May
Verle McClain
Barbara McCloskey
Anne McGee
Carol McKee
Patsy McKee
Eloise McKnight
Nancy McNeill
Brenda McPherson
Dr. John McReynolds
Scott Meyer
Anne Miller
Dr. David Milov
Loretta Monroe
Sandra Montieth
Eleanor Moon
Janet Moore
Dr. Walter Morales
Sheri Mosley
Dr. Mike Muszynski
Karen Nawrocki
Gale Newell
Kim Newman
Mary Norris
Dr. LeRoy Oetjen
Leslie Oygar
Crucita Pabon
Dr. Paul Palma
Carol Paris
Lenora Parker
Rick Parker
Kathy Paschel
Dan Pate
Anne Peach
Joe Bob Pearce
Londa Peterson
Christine Pierson
Jane Pool
Carla Powell
Pam Proctor
Dr. Norman Pryor
Dr. Arthur Raptoulis
Vickie Raptoulis
Liz Rash
Melanie Reis
Brenda Reschkee
Helen Ribbe
Mary Rogers
Margaret Rose
Susan Rowland
Sue Russell
Patti Salisbury
Marsha Sanford
Deborah Schaper
Be Schefhauser
Carol Sevlie
Sylvia Seymour
Ruth Shannabrook
Stephanie Sharp
Suzanne Sheres
Patty Sieffert
Marie Simpson
Sylvia Simpson
Dr. Linda Slater-Meyer
Diana Smith
Dr. Sam Smith
Dr. Stephan Snow
WPC Staff
Linda Stevens
Darla Stiles
Jeannie Stillwell
Sarah Storey
Julie Straight
Dr. Drew Straker
Sylvia Strode
Dr. Mark Swanson
Liz Sweeney
Dr. Tom Talley
Kay Taylor
Joy Tecca
Margaret Thomas
Rocky Thomas
Dr. Paul Thompson
Joan Tiller
Dr. Penny Tokarski
Maura Touchy
Donna Tuccio
Ruth Tucker
Lynn Ulmer
Jackie Varley
Barbara Vick
Linda Vick
Dr. Rosa Vidal
Al Vigo
Dr. Judy Wall
Holly Walls
Kathy Warren
Ruth Webb
Steve Webb
Suzan Weiss
Melissa Wentz
Nina Van Why
Beth Wierman-Lambert
Carol Wilkerson
Christine Williford
Debbie Wills
Diane Wink
Joanne Wit
Gregory Wolfe
Peggy Wooldridge
Wendy Yovaish
Helen Zeitler

VALENCIA
Community College

Orlando Regional
Medical Center

GRANT PARTNERSHIP RECEPTION

July 25, 1991

GRANT PARTNERSHIP RECEPTION

Health Care Demonstration Grant

Sixteen courses were developed and offered to enhance the knowledge of the nurses at Arnold Palmer Hospital of Children and Women in order to meet the highly specialized skills needed in caring for the high risk patients.

Pediatric Trauma Grant

Nine video tapes were developed to provide a highly specialized training program in pediatric trauma and emergency care.

Awards Presentation

Partnership	Anne Peach Joan Tiller
Presentation of Corporate . . . . . . Plaques	Dr. Edmund Gross Ms. Sherrie Sitarik
Presentation of Participation . . . . Awards	Joanne Wit Wendy Yovaish
Plaques	Barbara Krygier
Certificates	Connie Buecker

"Thanks" for successful grant programs:

Cory Adam
Dr. John Albritton
Dr. Gregor Alexander
Daleen Aragon
Danette Arcara
Deborah Artip
Toni Baker
Tracy Balling

Marie Barnard
Joy Bass
Barbara Bean
Dr. Bruce Bevitz
Carla Borelli
Marsha Bounds
Dr. Robert Bowles
Dr. Barry Boyd
Cathy Brazell
Cindy Brewer
George Brickelmaier
Debi Brinkmeyer
Linda Bronsted
Janeen Brown
Connie Buecker
Donna Butt
Carolyn Caffarelli
Mary Calebrisi
Dr. Tom Carson
Margaret Cavanaugh
Arthur Chiapa
Dr. Joe Chiaro
Sonia Chung
Helen Ciallella
Judy Cifrian
Steve Clarke
Gail Clayton
Laurie Clements
Sylvia Cline
Cindy Cohen
Cathy Cole
Priscilla Cooper
Sharon Cooper
Cindy Cruz
Candy Davis
Mary Degnan
Bill Denton
Dr. Paul Desrosiers
Jessica Devlin
Anne Dewey
Pervine Dewey
Ann Diaz
Helene Dodson
Marcia Dotts
Broneen Downey
Dr. Cliff[illegible]d Dubbon
Marge Duchano
Dr. Steve Early
Gail Eaton
Max Ehrlich
Jan Engel
Lori English
Elizabeth Evans
Barbara Faber
Shirley Ferris
Elizabeth Fink
Dan Fisher
Brenda Forrest
Geneva Frith
Willa Fuller
Laura Gladding
Brenda Glancy
Dwight Gooden
Mary Ann Gould
Sandy Gould
Cathy Gumtow
Karen Guritz
Judy Hamrick
Myra Hancock
Dr. Stanley Hand
Dr. Douglas Hardy
Ethel Harris
Cathy Hartigan
N.S. Hastler
Mike Heinricks
Maureen Hendrickson
Sherrill Hicklin
Betty Holly
Jeane Horne
Tammy Horvath
Grace Ingwalson
Donna Jackson
Michelle James-Trychell
Stephanie Janssen
Mimi Johnson
Samantha Johnson
Linda Jones
Louise Kaigle
Susan Kelley

ATTACHMENT I

Presentations:

1. May 21, 1990
   Fifth Annual Conference for Allied Health and Nursing, Orlando, Florida - "Developing Partnerships" (Joanne Wit, Barbara Krygier, Anne Peach, Connie Bueker)

2. September 9, 1990
   Florida Deans and Directors. "Overview Health Care Demonstration Project" (Anne Miller)

3. September 9, 1990
   Florida Nurses Association (Anne Miller)

4. January 3, 1991
   Faculty Development Conference, Orlando, Florida (Joanne Wit)

5. February 28, 1991
   Florida League for Nursing, State Conference, Tampa, Florida (Joanne Wit)

6. March 6-9, 1991
   Maternal Child Nursing Convention, New Orleans, Louisiana (Joanne Wit, Anne Peach)

7. June 29, 1991
   Nursing Education '91, Boston, Massachusetts (Joanne Wit)

8. July 21-24, 1991
   ASHET, Salt Lake City, Utah (Anne Peach, Connie Bueker)

Publications:

Peach, Anne and Wit, Joanne. "A Partnership in Education and Practice." Florida Nurse. May 1991. Vol. 39, #5.

Wit, Joanne. "Grants - Partnerships Between Business and Educational Institutions." FSHET Focus. May 1990. Vol. IV, #4.

Wit, Joanne. "Education and Health Care Industry: Partnership for Education." Hospital News Central Florida. May, 1991.

Education and the Health Care Industry: Partnership for Education

Central Florida is experiencing rapid population and high tech growth. According to the Florida Hospital Association, there is a severe need for registered nurses in Central Florida: what we face has been called "the health care crisis."

Arnold Palmer Hospital for Children and Women (APH) a division of Orlando Regional Medical Center, opened in September 1989. The forecast of a nursing shortage and health care crisis loomed even larger because of the need for highly specialized nurses in the critical care units which impact Central Florida and the entire Southeastern United States.

The labor and delivery, pediatric and neonatal units at APH had 7 to 10 RN positions available per unit in January, 1990, which presented a genuine need for the hospital to determine a way to turn this around. The cost of such a rate in terms of staffing the units and in preparing nurses to work in the units, as well as elevate the performance level of the present staff was staggering.

This led APH to explore ways to resolve their dilemma: that is to successfully effect advanced health care and nursing skills in pediatric, neonatal and obstetrical and critical care areas.

Valencia Community College (VCC) serves Orange and Osceola counties in Central Florida. A major commitment of the college is to provide quality, state of the art education in the area of training highly technical workers. VCC offers an Associate of Science in Nursing. This student is prepared at the technical level and is prepared to sit for the state licensing exam for Registered Nurse. In addition to preparing the nurses at the entry level, the college's mission is to serve the community in addressing its educational needs.

A partnership between APH and VCC was established to address the educational needs of the hospital in staffing its units and preparing its nurses for the level of care provided at the hospital. Federal funding was sought and received from the Vocational Education Department which to develop an educational package and offer programs that would contribute in resolving the staffing needs at APH.

There are three major components in the educational program. The first includes nine continuing education courses that are directed toward maintaining and refocusing the technical skills of the nurses at APH, as well as nurses throughout Central Florida who work in high tech pediatric, obstetric and neonatal nursing care settings. The second component of the program meets the goal of nurses seeking clinical advancement. These courses allow the nurse to earn while learning and are designed to facilitate the retraining of the nurse in a new specialty, as in the high tech care delivered at APH. The last group of courses is designed for nurses working in high tech who want to, and are ready for, the challenge of an expanded role.

Through collaboration, courses have been offered in all the specialty areas in which nursing staff was needed at APH. The courses offered to new staff included a theory and clinical component. The theoretical base to care for the patient the high risk setting was expanded in classroom setting and then the new st member worked on the unit one-on-o with a preceptor to apply the concepts patient situations. These courses range from eight weeks to twelve weeks in leng with two to five weeks of theory in th class setting and the remainder of tim spent on the unit.

The nurses participating in the cours

continued on page 1

requires an effective use of space and style.

ualified designer
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national two day exam covering a one day written part with questions on the following: design concepts, program requirements, building and barrier free codes, space planning, plumbing, furniture scale and arrangement, appropriateness of design, furniture selection, finish materials, lighting, electrical, design theory, communication skills and contract documents, building construction and support systems, business and professional practice, and the history of design and graphic/working drawing.

The second day is a 10 hour drafting and design problem which covers all of the above subjects. The exam is then sent around the country to different judges who grade the problem.

2. The interior designer as of January 1, 1990 in the state of Florida will have to take 20 hours of continuing education units. These are very costly and individuals not serious about being a designer will probably not invest in these classes and lose their license.

3. Look for ASID or IBD after the designer's name on their business card. After

completed. He or she should go see these spaces and talk to the physician who has worked with this particular designer. Questions should be asked like what was the designer like to work with? Did the designer project the image correctly? Was the designer easy to communicate with? Did the designer solve any problems that arose? Were you happy with the finished product?

Remember your office or clinic is a large investment and please use a designer who knows what they are doing.

Designers who know how to chose the right colors and the right materials for carpet, wall coverings and seating can help an office maintain its fresh new look for many years after the initial design work is completed.

Ginger Tarr Shea ASID
President, Medical Design Inc.

Shea specializes in designing medical facilities and living space for elderly and handicapped individuals.

Education Partnership

from page 5

made comments such as "this course gave me a stronger base of knowledge to practice on the peds. unit," "...helpful in adapting to the level of care on the unit," "great opportunity to learn and get hands on experience," "I was apprehensive to begin working in Labor and Delivery, but after the class and knowing I'll be with a preceptor, I know I'll be O.K."

The head nurses have voiced satisfaction with the new staff members after completion of the courses. Administration is happy with the outcome because staffing has improved on the units targeted by the grant. The turnover rate has decreased from 19% in January, 1990 to 13% in January, 1991. The neonatal intensive care unit has a waiting list for persons desiring to work on the unit. The hospital has been able to expand its ECMO capacity from one unit to two units because there are now enough personnel prepared to work at the level necessary in that role. The success of the program is just beginning to be felt. As the educational agenda continues, the full impact of staff prepared at a higher level will be realized.

By Joanne Witt, RN, MSN, EdS
Professor
Valencia Community College

Efficient Space Planning

from page 17

Business Office-- Is the business office window for the reception counter located in a spot where patients can easily chek in? Can the charts easily be found so they are ready for the nurses?

Check Out or Bill Paying Area-- Is this in a private spot so nobody can see what is written for diagnosis, prescriptions and/or payments? Is it accessible for the employees to get to easily?

These are just some of the questions that should be asked, answered and dealt with for proper space planning in the medical office.

If these items are all considered properly, the office will flow very smoothly, your patients will be very comfortable, and your staff will feel more comfortable with the work environment. All of this adds up to a more efficient office that is also a more enjoyable place to work. Most importantly, it can be more profitable for you and allow you to be more competitive in the future.

By Joe Czarnecky
Midmark Casework Manager

A Partnership in Education and Practice

Anne Peach

By Anne Gallagher Peach, RN, MSN
and Joanne Wit, EdS

Graduation from today's nursing schools assures a nurse skilled in the use of basic technology and modern nursing concepts. On the other hand, the tertiary care hospital requires that nurses care for patients sicker than ever before--patients who require a level of care and technical expertise that only develops with experience and proper supervision. Eliminating this gap between basic and advanced ability is the job of today's *nursing educator*, in partnership with the teaching hospitals.

In 1990, Valencia Community College and Arnold Palmer Hospital agreed to apply for a grant from the Department of Education entitled, "A Model Vocational High Technology in Health Care Demonstration Project", to set up a partnership education program. With approval of the grant, meeting began between college and hospital educators to shape the agenda for the next 18 months.

The common goal was to prepare nurses and other allied health professional to work on the high tech units at Arnold Palmer Hospital and to better meet the educational needs of those nurses already working on the units. Accomplishing these goals was not always easy. Office space for Valencia Community College staff could not be found near the Arnold Palmer Hospital units to which they were assigned. Goals were not always viewed the same way. Roles needed to be identified. However, the benefits far outweighed the difficulties encountered:

- improved staffing (and thus patient care)
- closer relationship between Valencia Community College and Arnold Palmer Hospital staff
- Valencia Community College faculty gained an inside look and understanding of Arnold Palmer Hospital operation
- educational package developed with courses offered to nurses.

Just how far this collaboration has come is best demonstrated by the Arnold Palmer Hospital nurse manager who recently called the Valencia Community College faculty member to ask that an orientation program be repeated.

Three major components were developed under terms of the partnership:

- Nine continuing education courses directed toward maintaining and increasing nursing, skills at Arnold Palmer Hospital
- Orientation courses that permit nurses to earn while they learn a new specialty or high tech area
- Courses to help Arnold Palmer Hospital nurses with high tech experience adapt to an expanded role.

Perhaps the best measure of the success of this partnership at Arnold Palmer Hospital comes from comments made by some of the 344 nurses who have attended classes. "This course gave me a stronger base of knowledge to practice on NICU" said one nurse. "I was apprehensive to begin working in L & D", said another, "but, after the class and knowing I'll be with a preceptor, I know I'll be okay."

Numbers of vacant staff positions also diminished. The turnover rate at Arnold Palmer Hospital decreased in twelve months from 19% to 13%. Even greater results are anticipated over time. Meanwhile, Valencia Community College has also noted program benefits. Educational dollars went further in meeting community needs. Higher program visibility resulted in increased admission applications and an increased profile in the community. Faculty members were able to remain current on nursing procedures and integrate these into the curriculum.

Change is the one thing that is consistent in the nursing profession. The Valencia Community College/Arnold Palmer Hospital partnership has prepared both organizations to meet the challenge of health care and nursing practice in central Florida over the next few years.

Margaret Styles, the nationally known nursing leader, says collaboration between nursing education and service is a necessary ingredient in public acceptance of nursing. Partnerships between nursing education and services are integral to reshaping the profession and directing the course of its future.

Duane Walker, in an article in *Nursing & Health Care*, identifies four attitudes he found to be important for a successful collaboration:

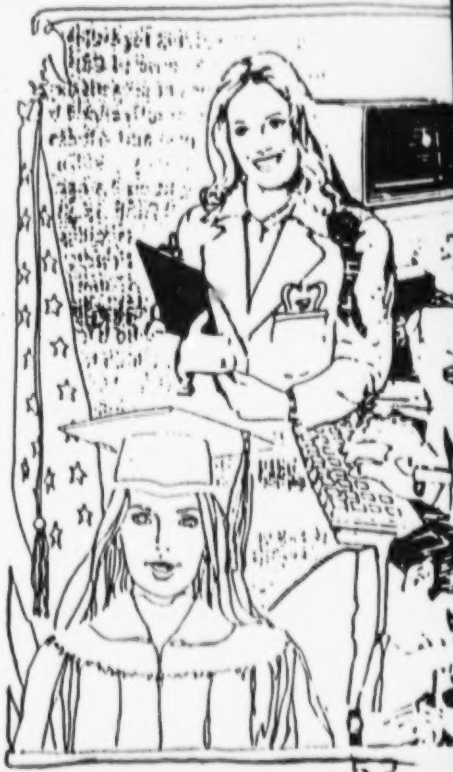
- commitment to the main purpose and to the profession
- realistic expectations of one another
- willingness to accept responsibility for helping each other
- flexibility

In central Florida, Valencia Community College and Arnold Palmer Hospital for Children & Women are demonstrating the type of partnership called for by Styles and Walker; a joint effort to the education and services together to benefit patients and nurses.

Anne Gallagher Peach, RN, MSN is the Chairperson of the Council of Nurse Educators. She is Director of Health Care Education/ Medical Continuing Education at Orlando Regional Medical Center, Orlando, Florida.

Joanne Wit, Ed.S, is the Director of Federal Demonstration Project Grant and is on the Faculty at Valencia Community College.

Further information about the courses or curriculum is available by contacting the authors. □



FSHET FOCUS

FLORIDA SOCIETY FOR HEALTHCARE, EDUCATION AND TRAINING

AN AFFILIATE OF THE FLORIDA HOSPITAL ASSOCIATION, THE AMERICAN SOCIETY FOR HEALTHCARE EDUCATION AND TRAINING OF THE AMERICAN HOSPITAL ASSOCIATION

VOLUME IV
NUMBER 4

May 1990
P.O. Box 531107

FROM THE PRESIDENT'S DESK . . . **Nancy Edwards**, RN, MS, Assistant Director/Nursing for Education, HCA Central Florida Regional Hospital, Sanford.

Sometimes I am asked "How can I become more involved with FSHET?" One of our goals this year is to help our members find ways to be more involved with the organization. We hope that by increasing membership participation, we will increase our own effectiveness. One of the ways in which you can be more involved is to offer your expertise and time to your Regional Representative. Right now, they are involved with surveying the membership so that we may have a more complete membership directory. Since we need 100% participation with the survey, it will mean that those members not responding will need to be surveyed by telephone. I know that all of the Regional Reps are not blessed with any more time to do this than the rest of us, so any help they can receive will be most appreciated. Once we have the information, we will need your help in compiling it in a timely manner.

FSHET's Annual Meeting will be held at the Buena Vista Palace in Orlando on November 7-9, 1990. November 8 and 9 will be a combined meeting with the other FHA societies, but on November 7, we will have programs for FSHET members, as well as our Annual Business Meeting. Help from our members will insure a successful meeting.

If you can even offer a small amount of time, please contact your Regional Representative. They are: East Central - **Betty Jones**, West Volusia Memorial Hospital, Deland; South - **Leah Kinnaird**, Baptist Hospital of Miami; West Central - **Kitty Barnett**, Winter Haven Hospital; Northwest - **Karen Pietrodangelo**, Tallahassee Memorial Regional Medical Center; Northeast - **Janine Waters**, St. Vincent's Medical Center, Jacksonville; **Jo-Ann Byrne**, Holmes Regional Medical Center, Melbourne, is in charge of the Annual Meeting.

Also remember, it's not too late to volunteer your services to Connie Buecker at Orlando Regional Medical Center to help at the ASHET Annual Meeting, June 9-12 in Orlando!

GRANTS-PARTNERSHIPS BETWEEN BUSINESS AND EDUCATIONAL INSTITUTIONS . . . submitted by **Connie Buecker**, RN, Nursing SIG Representative, Orlando Regional Medical Center and **Joanne Wit**, RN, Grant Coordinator, Orlando Regional Medical Center.

At Arnold Palmer Hospital for Children and Women, a division of Orlando Regional Medical Center, Cinderella's Castle stands in the main entrance and heralds the quarter hour throughout the day. On nursing units for both children and women, the quarter hour is heralded in many ways. The services provided to children and women at APH is high tech requiring special nursing skills. The nursing units providing this high tech service are in need of greater numbers of staff with the skills to provide the "CARE" needed. Also, with increased services being provided, there is also a need to 'expand the role' of nurses already working at APH.

In cooperation with Valencia Community College, a federal grant was applied for and received. As partners, APH and VCC are developing an education package to meet the educational needs of APH and may serve as a model in other high tech health care settings. Part of the package is eight to twelve week courses including both theory and clinical orientation with a preceptor for neo, pediatrics, L&D, PICU and Emergency/Trauma units. The nurse is paid during the learning experience and earns college credit. There are also continuing education credit offerings. The relationship that exists is truly a partnership between nursing education and nursing service in that we are sharers, are associates by virtue of our association, and have a joint interest in accomplishing a common goal: delivery of quality care through the development of nursing potential.

ATTACHMENT J

VALENCIA
Community College

July 3, 1991

Betty Morgan
Director, Nursing Program
Palm Beach Community College
4200 Congress Avenue
Lake Worth, FL 33461

Dear Ms. Morgan:

Graduation from today's nursing schools assures a nurse skilled in the use of basic technology and modern nursing concepts. On the other hand, the tertiary care hospital requires that nurses care for patients sicker than ever before--patients who require a level of care and technical expertise that only develops with experience and proper supervision. Eliminating this gap between basic and advanced ability in an ever changing high tech setting, is the focus of the vocational education program developed cooperatively by Valencia Community College and Arnold Palmer Hospital for Children and Women through a grant from the U.S. Department of Vocational Education.

The goal of the partnership established was to prepare nurses and other allied health professionals to work on the high tech units at Arnold Palmer Hospital and to better meet the educational needs of those nurses already working on the units.

Three major educational components were developed under terms of the partnership:

- Nine continuing education courses directed toward maintaining and increasing nursing skills at Arnold Palmer Hospital.
- Orientation courses that permit nurses to earn while they learn a new specialty or high tech area.
- Courses to help Arnold Palmer Hospital nurses with high tech experience adapt to an expanded role.

The benefits to both partners has certainly out weighed the difficulties encountered:

- improved staffing (and thus patient care)
- closer relationship between Valencia Community College and Arnold Palmer Hospital staff
- Valencia Community College faculty gained an inside look and understanding of Arnold Palmer Hospital operation
- education package developed with courses offered to nurses.

P.O. Box 3028 Orlando, FL 32802-3028
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Suncom 339-0111
An equal opportunity institution

The educational package developed through the grant has been beneficial to both Valencia Community College and Arnold Palmer Hospital. This concept of partnership between education and practice along with the educational package serves as a model for other educational and practice institutions in order to bridge the gap between education and the ever changing needs in the practice setting.

We will be happy to provide additional information regarding the partnership and/or the educational package developed as part of this project.

Sincerely,

Joanne Wit

Joanne Wit, EdS, MSN, RN
Project Coordinator

JW/kbm

ATTACHMENT K

Course: Advanced Technology in Neonatal Intensive Care

Date: January, 1990

Attendance: 10

Course Description:

This program designated for graduate and registered nurses will provide the advanced knowledge necessary for the care of the moderate to hi-risk neonate. Anatomy, physiology and pathophysiology of the cardiac, pulmonary, neurologic, renal and hemopoietic systems will be discussed in detail. Clinical instruction focuses on assessment, skills, use of ventilators, maintenance of central lines, care of chest tubes, hemodynamic monitoring, administration of vasopressor medication, and neonatal resuscitation. It is designed to provide the nurse without neonatal experience the knowledge and skills necessary for neonatal nursing care. The nurse with experience will be familiar with the policy and procedures of our institution.

Course Objectives:

Upon successful completion of the course, the nurse participant will be able to:

1. Demonstrate a head-to-toe assessment of the newborn in the delivery/room admissions nursery.

2. Utilize the neonatal documentation tools.

3. Describe common congenital malformations noted during the assessment (including Down's Syndrome, Trisomy 13, Trisomy 18, myelomeningocele, imperforate anus, and tracheoesophageal fistula).

4. State the multisystem effects of asphyxia on the newborn.

5. Demonstrate the nursing responsibility regarding fluid therapy initiation and maintenance including the recognition of abnormal laboratory values.

6. Utilize the nursing process in the care of the neonatal patient by assessing, planning, implementing and evaluating the neonate with:

    a. respiratory dysfunction
    b. gastrointestinal dysfunction
    c. cardiac dysfunction
    d. hematologic dysfunction
    e. renal
    f. neurologic dysfunction
    g. sensory impairment
    h. musculoskeletal dysfunction
    i. skin disorders
    j. metabolic dysfunction

   i. skin disorders
   j. metabolic dysfunction
   k. psychophysiologic dysfunction
   l. chronic illness
   m. infectious disorders

7. Define and discuss the clinical diagnosis and nursing management of the infant with congenital heart disease.

8. Explain the pathophysiology of the neonate with Respiratory Distress Syndrome.

9. Demonstrate the management of the neonate with meconium aspiration in the delivery room.

10. Discuss nursing management of the infant with persistent pulmonary hypertension.

11. Differentiate between pneumonia and respiratory distress syndrome.

12. State the four grades of intraventricular hemorrhage (IVH) and discuss methods that may decrease the risk of IVH.

13. Demonstrate care of the neonate with necrotizing enterocolitis.

14. Utilize monitoring equipment accurately and safely (i.e. cardiorespiratory, Tcpo2, blood pressure, oximeter, dinamap blood pressure, and hematocrit machine).

15. Correctly administers pharmacologic agents to the neonate, identifying the indications, precautions and side effects of the drug.

16. Administer and monitor drugs on constant infusion pumps. (i.e. Epinephrine, Dopamine, Priscoline and Amphotericin).

17. Demonstrate ability to follow NICU guidelines and protocols for the resuscitation of an infant.

18. Assist physician or a nurse in the performance of the following procedures: insertion of an umbilical or arterial or venous line, insertion of chest tubes, intubation of the trachea, exchange transfusion, circumcision, or septic work-up.

19. Demonstrate ability to provide teaching and support to the families of infants in the NICU in conjunction with the family support staff and other members of the health care team.

20. Identify growth and developmental needs of the premature infant or sick term infant.

21. Establish priorities for patient care activities based upon acuity and patient/family needs.

22. State rationale for priorities and clinical decisions based on scientific principles and NICU policies and procedures.

23. Communicate effectively with the families of the high-risk neonate.

Course: Cardiac Intensive Care
The Neonatal Patient
The Pediatric Patient

Data: April 19 and 20, 1990

Attendance: 35

Course Description:

As part of our commitment of professional excellence, the Arnold Palmer Hospital for Children and Women and the Valencia Community College Nursing Program are providing this course to prepare the neonatal nurse, the pediatric/pediatric ICU nurse, and the respiratory therapist to care for the young cardiac patient.

Course Objectives:

At the completion of this program the participants will be able to:

1. Identify the common congenital heart lesions.
2. Discuss post catherization care of the neonatal or pediatric patient.
3. Explain hemodynamic monitoring of the neonatal and pediatric patient.
4. Assess the newborn patient pre-operatively.
5. Discuss the pharmacological support of the cardiac patient.
6. Differentiate between cardiogenic shock and hypovolemic shock.

Course: Minimizing the Traumatic Effects for the Child
"A Child's Hospitalization"

Date: April 27, 1990

Attendance: 37

Course Description:

Valencia Community College Nursing Program and The Arnold Palmer Hospital for Children and Women have designated a program related to minimizing the traumatic effects of hospitalization on the child. The target audience is the health care person who provides care to the hospitalized child.

This unique program is formulated to enhance the knowledge of health care personnel concerning the acutely ill child's perception of hospitalization. Emphasis will be to explore the effects of hospitalization on the child.

Course Objectives:

At the end of the program, the participant will be able to:

1. Recognize ways to alleviate the child's fears of the hospital experience.
2. Identify the behaviors of the child who signals stress.
3. Recognize the needs of siblings.
4. Explore ways of effective communication with children and adolescents.
5. Recognize the role of play for the child.
6. Experience the frustrations of the hospitalized child.
7. Recognize the value of parents at the bedside.

ATTACHMENT L

EDUCATIONAL NEEDS ASESSMENT

JANUARY, 1990
ADMISSION AND EXTENDED CARE NURSERY

In an effort to fill the needs of all of our nurses, I would like your input. Please take a couple minutes to fill out this assessment. I appreciate and truly need your ideas and comments.

Thank you.

Please choose 10 topics that you would like to have discussed at short courses over the next year.

1	a.	AIDS
5	b.	ABO
4	c.	Acid base balance
4	d.	Alimentary tract obstructions
4	e.	Apnea and Bradycardia
5	f.	Asphyxia
0	g.	Bereavement
1	h.	Burnout
4	i.	Circumcision
0	j.	Congenital Heart Disease
4	k.	Congenital anomalies
3	l.	Chromosomal abnormalities
3	m.	CML infection
6	n.	Developmental interventions
6	o.	Electrolyte balance
4	p.	Ethical dilemmas
4	q.	Exchange transfusion
1	r.	Feeding a Preemie
0	s.	Gastrostomy tubes
0	t.	Hyperbilirubinemia
1	u.	Hyper Alimentation
0	v.	Hypo/Hyperglycemia
3	w.	Infant of diabetic mom
2	x.	Kidney failure
3	y.	Legal issues
5	z.	Necrotizing enterocolitis
1	aa.	Neonatal morbidity
1	bb.	Newborn Assessment
0	cc.	Ostomy care
1	dd.	Pharmacy Series
4	ee.	Pnemuocardiogians
4	ff.	Resuscitation
1	gg.	RDS
3	hh.	Retinopathy
3	ii.	Saturation monitors
13	jj.	Seizures
4	kk.	SGA, especially causes
6	ll.	Sepsis
7	mm.	Spina Bifida

21	nn.	TORCH infections
17	oo.	X-ray interpretation
14	pp.	Infants of moms abusing drugs
3	qq.	Teenage pregnancy
18	rr.	Murmurs
22	ss.	ECMO
1	tt.	How to use defibrillator

Thank you again for completing this assessment. Please return this assessment to your preceptor.

Needs assessments handed out - 41
Needs assessments handed in - 30

EDUCATIONAL NEEDS ASSESSMENT
JANUARY, 1990
ADMISSION AND EXTENDED CARE NURSERY

Courses in the Educational Package that address the Needs Assessment.

a.	4,15	x.	5
b.	4,15	y.	0
c.	1,4	z.	1
d.	1,4	aa.	0
e.	1,4,5	bb.	15,4
f.	1,4,5	cc.	1,4
g.	8,15	dd.	0
h.	0	ee.	1,5
i.	0	ff.	1,5
j.	2,4,5,7	gg.	1
k.	4	hh.	1
l.	4	ii.	1,5
m.	4	jj.	0
n.	10	kk.	1
o.	1	ll.	1,4
p.	0	mm.	4
q.	4	nn.	1,4
r.	1	oo.	0
s.	1,4	pp.	0
t.	1,4	qq.	11,13
u.	1,4	rr.	1,5
v.	1,4	ss.	3
w.	1,4	tt.	1,5

GRANT COURSES

1. Advanced Technology in Neonatal Intensive Care
2. Neonatal Cardiac Intensive Care
3. Extracorporeal Membrane Oxygenation
4. Advanced Technology in Pediatric Nursing
5. Advanced Technology in Pediatric Intensive Care
6. Pediatric Nursing Chemotherapy Technology
7. Pediatric Cardiovascular Nursing
8. When the Young Die in a High Technology Environment
9. Minimizing the Traumatic Effects for the Child
10. Growth and Development in High Tech Pediatric Nursing
11. Advanced Technology in Nursing Care of the Adolescent
12. Critical Care Concepts for Obstetrical Nurses
13. Nursing Management of High Risk Pregnancy
14. Fetal Monitoring
15. Advanced Care in Labor and Delivery
16. High Technology Trauma Nursing

0. Not Included in Grant

EDUCATIONAL NEEDS ASSESSMENT
JANUARY, 1990
Neonatal Intensive Care Nursery

In an effort to fill the needs of all of our nurses, I would like your input. Please take a couple minutes to fill out this assessment. I appreciate and truly need your ideas and comments.

Thank you.

Please choose 10 topics that you would like to have discussed at short courses over the next year.

8 a. AIDS
18 b. ABO
9 c. Acid base balance
5 d. Alimentary tract obstructions
1 e. Apnea and Bradycardia
4 f. Asphyxia
4 g. Bereavement
17 h. Burnout
4 i. Circumcision
4 j. Congenital Heart Disease
25 k. Congenital anomalies
22 l. Chromosomal abnormalities
22 m. CML infection
15 n. Developmental interventions
7 o. Electrolyte balance
7 p. Ethical dilemmas
18 q. Exchange transfusion
7 r. Feeding a Preemie
0 s. Gastrostomy tubes
1 t. Hyperbilirubinemia
0 u. Hyper Alimentation
3 v. Hypo/Hyperglycemia
1 w. Infant of diabetic mom
4 x. Kidney failure
16 y. Legal issues
24 z. Necrotizing enterocolitis
2 aa. Neonatal morbidity
2 bb. Newborn Assessment
1 cc. Ostomy care
15 dd. Pharmacy Series
9 ee. Pnemuocardiogians
5 ff. Resuscitation
4 gg. RDS
6 hh. Retinopathy
3 ii. Saturation monitors
7 jj. Seizures
4 kk. SGA, especially causes
6 ll. Sepsis
7 mm. Spina Bifida

9	nn.	TORCH infections
17	oo.	X-ray interpretation
9	pp.	Infants of moms abusing drugs
3	qq.	Teenage Pregnancy
18	rr.	Murmurs
22	ss.	ECMO
9	tt.	How to use defibrillator

Thank you again for completing this assessment. Please return this assessment to your preceptor.

Needs assessments handed out 34
Needs assessments handed in 25

EDUCATIONAL NEEDS Assessment
JANUARY, 1990
Neonatal Intensive Care Nursery

Courses in the Educational Package that address the Needs Assessment.

a.	1
b.	1
c.	1,2
d.	1
e.	1
f.	1
g.	1,8
h.	1
i.	0
j.	2
k.	1
l.	1
m.	0
n.	1
o.	1,2
p.	1
q.	1
r.	1
s.	1
t.	1
u.	1
v.	1
w.	0
x.	1
y.	1
z.	1
aa.	1
bb.	1,15
cc.	1,5
dd.	0
ee.	1
ff.	1,5,15
gg.	1
hh.	1
ii.	1,2
jj.	1,4
kk.	1
ll.	1
mm.	4
nn.	1
oo.	1
pp.	1,4
qq.	11
rr.	1
ss.	1,3
tt.	0

GRANT COURSES

1. Advanced Technology in Neonatal Intensive Care
2. Neonatal Cardiac Intensive Care
3. Extracorporeal Membrane Oxygenation
4. Advanced Technology in Pediatric Nursing
5. Advanced Technology in Pediatric Intensive Care
6. Pediatric Nursing Chemotherapy Technology
7. Pediatric Cardiovascular Nursing
8. When the Young Die in a High Technology Environment
9. Minimizing the Traumatic Effects for the Child
10. Growth and Development in High Tech Pediatric Nursing
11. Advanced Technology in Nursing Care of the Adolescent
12. Critical Care Concepts for Obstetrical Nurses
13. Nursing Management of High Risk Pregnancy
14. Fetal Monitoring
15. Advanced Care in Labor and Delivery
16. High Technology Trauma Nursing

0. Not Included in Grant

EDUCATIONAL NEEDS ASSESSMENT
JANUARY, 1990
PEDIATRIC SPECIAL CARE UNIT

In an effort to fill the needs of all of our nurses, I would like your input. Please take a couple minutes to fill out this assessment. I appreciate and truly need your ideas and comments.

Please choose 10 topics that you would like to have discussed at short courses over the next year.

4	a.	Genetic counseling
8	b.	Legal aspects
6	c.	Bereavement
2	d.	Assessment techniques
0	e.	AIDS
3	f.	Psychological aspects
1	g.	Caloric Needs
3	h.	PCA Pump
3	i.	Pain control
5	j.	Dealing with anxious parents
6	k.	Drugs and toxicity
3	l.	Child Abuse
1	m.	Therapeutic play interventions
2	n.	Street Drugs
5	o.	Fluid and electrolyte balance assessment and replacement
0	p.	Neonatal assessment
1	q.	Growth and Development: Nursing interventions
6	r.	Ventilator: Troubleshooting
11	s.	ICP Monitors
9	t.	Pediatric EKG intervention
6	u.	Code 45
0	v.	Infection control
6	w.	New scoliosis surgery procedures: nursing implications
2	x.	Umbilical line placement and care
6	y.	Broviac/Hickmen lines
4	z.	Infuse a port care
7	aa.	Exchange transfusion
13	bb.	Peritoneal dialysis
5	cc.	Thoracentesis
3	dd.	Leukemia patient
5	ee.	Swan Ganz line care
3	ff.	Burnout (nursing)
6	gg.	ABO Interpretation
1	hh.	Specific Diseases

Needs assessments handed out 23
Needs assessments handed in 15

EDUCATIONAL NEEDS ASSESSMENT
JANUARY, 1990
PEDIATRIC SPECIAL CARE UNIT

Courses in the Educational Package that address the Needs Assessment.

a.	0	r.	5,7
b.	4,5	s.	5,4,7
c.	8,4,5	t.	5,4,16
d.	7,4,5	u.	16,7,4,5
e.	4	v.	4,5,16
f.	9,8,10,11,4,5	w.	4,5
g.	4	x.	5,7
h.	4	y.	6,4,5,7
i.	4,16	z.	6,4,5
j.	16,4,5,11,8,9	aa.	4
k.	7,16,4,5	bb.	4,5
l.	4,5	cc.	6,4,5
m.	9,8,10,4,5	dd.	4,6
n.	11,16	ee.	5,7
O.	4,5,16,7	ff.	0
p.	7,4,5	gg.	4
q.	10,11,9,8,4,5	hh.	4

GRANT COURSES

1. Advanced Technology in Neonatal Intensive Care
2. Neonatal Cardiac Intensive Care
3. Extracorporeal Membrane Oxygenation
4. Advanced Technology in Pediatric Nursing
5. Advanced Technology in Pediatric Intensive Care
6. Pediatric Nursing Chemotherapy Technology
7. Pediatric Cardiovascular Nursing
8. When the Young Die in a High Technology Environment
9. Minimizing the Traumatic Effects for the Child
10. Growth and Development in High Tech Pediatric Nursing
11. Advanced Technology in Nursing Care of the Adolescent
12. Critical Care Concepts for Obstetrical Nurses
13. Nursing Management of High Risk Pregnancy
14. Fetal Monitoring
15. Advanced Care in Labor and Delivery
16. High Technology Trauma Nursing

0. Not Included in Grant

EDUCATIONAL NEEDS ASSESSMENT
JANUARY, 1990
TOWER 6

In an effort to fill the needs of all of our nurses, I would like your input. Please take a couple minutes to fill out this assessment. I appreciate and truly need your ideas and comments.

Thank you.

Please choose 10 topics that you would like to have discussed at short courses over the next year.

10	a.	Infection control
11	b.	Diabetes
8	c.	Genetic Counseling
15	d.	Legal aspects
7	e.	Bereavement-
5	f.	Adolescents
6	g.	Assessments
18	h.	AIDS
6	i.	Psychosocial aspects
18	j.	Burnout (nursing)
13	k.	Child Abuse
6	l.	Drug Abuse
9	m.	Newborn assessment
13	n.	Cardia diseases
13	o.	Support services for pediatric patients and families
6	p.	Nutritional needs and new trends in dietary management
1	q.	Growth and development
7	r.	Organizational skills
14	s.	Communication skills in dealing with parents
13	t.	Stress management
9	u.	Crisis intervention with parents
13	v.	Other departments in the hospital who interact with pediatric patients. (i.e., EEG, Nuclear Medicine, Blood Bank, Radiology Center, CPT, Mental Health, Neo Parent-Infant Education, Infant Hearing and Screening, BIRC Unit, OP, PT)
5	w.	Anesthesia
11	x.	Drugs and toxicities
5	y.	Diagnostic tests and x-rays
5	z.	Chronic care
10	aa.	Code 45
14	bb.	Breath sounds
9	cc.	Chemotherapy
5	dd.	Cancer patient care
7	ee.	Cardiovascular - post open heart patient care
6	ff.	Failure to thrive
7	gg.	Fluid and electrolyte needs
9	hh.	Administration of blood products (cryo, albumin, plasmanate, SPA, sandoglobulins)

1 ii. Musculoskeletal disorders
2 jj. Respiratory Diseases (cystic fibrosis)
1 kk. GI diseases
1 ll. Neuro diseases
0 mm. Hyperalimentation
1 nn. Aminophylline drips
11 oo. Pain and pain control with children
5 pp. Therapeutic Play
0 qq. Others

Needs assessments handed out 32
Needs assessments handed in 20

EDUCATIONAL NEEDS Assessment
JANUARY, 1990
TOWER 7

In an effort to fill the needs of all of our nurses, I would like your input. Please take a couple minutes to fill out this assessment. I appreciate and truly need your ideas and comments.

Thank you.

Please choose 10 topics that you would like to have discussed at short courses over the next year.

0	a.	Infection control
7	b.	Diabetes
2	c.	Genetic Counseling
3	d.	Legal aspects
1	e.	Bereavement
2	f.	Adolescents
0	g.	Assessments
4	h.	AIDS
1	i.	Psychosocial aspects
5	j.	Burnout (nursing)
3	k.	Child Abuse
2	l.	Drug Abuse
0	m.	Newborn assessment
4	n.	Cardia diseases
6	o.	Support services for pediatric patients and families
2	p.	Nutritional needs and new trends in dietary management
1	q.	Growth and development
0	r.	Organizational skills
3	s.	Communication skills in dealing with parents
6	t.	Stress management
3	u.	Crisis intervention with parents
4	v.	Other departments in the hospital who interact with pediatric patients. (i.e., EEG, Nuclear Medicine, Blood Bank, Radiology Center, CPT, Mental Health, Neo ParentInfant Education, Infant Hearing and Screening, BIRC Unit, OP, PT)
2	w.	Anesthesia
5	x.	Drugs and toxicities
4	y.	Diagnostic tests and x-rays
2	z.	Chronic care
3	aa.	Code 45
4	bb.	Breath sounds
5	cc.	Chemotherapy
3	dd.	Cancer patient care
2	ee.	Cardiovascular - post open heart patient care
2	ff.	Failure to thrive
4	gg.	Fluid and electrolyte needs
6	hh.	Administration of blood products (cryo, albumin, plasmanate, SPA, sandoglobulins)

0 ii. Musculoskeletal disorders
1 jj. Respiratory Diseases (cystic fibrosis)
0 kk. GI diseases
0 ll. Neuro diseases
0 mm. Hyperalimentation
0 nn. Aminophylline drips
2 oo. Pain and pain control with children
2 pp. Therapeutic play
0 qq. Others

Needs assessments handed out 30
Needs assessments handed in 15

EDUCATIONAL NEEDS ASSESSMENT
JANUARY, 1990
TOWER 6-7

Courses in the Educational Package that address the Needs Assessment.

a.	4	v.	4
b.	4,5	w.	0
c.	0	x.	4,5,7
d.	4,5	y.	4,5,7
e.	8,4	z.	4,11
f.	4,10,11	aa.	4,5
g.	4,5	bb.	4
h.	4	cc.	4
i.	4,5,8,9	dd.	4
j.	0	ee.	2,7
k.	4	ff.	4
l.	4,11	gg.	4,5,7
m.	4	hh.	4
n.	4,5,7	ii.	4
o.	4,9,8,11	jj.	4
p.	4	kk.	4
q.	4,10,11	ll.	4
r.	4,5	mm.	4
s.	4,5,8,9,10,11	nn.	4
t.	4	oo.	4
u.	8,9	pp.	4

GRANT COURSES

1. Advanced Technology in Neonatal Intensive Care
2. Neonatal Cardiac Intensive Care
3. Extracorporeal Membrane Oxygenation
4. Advanced Technology in Pediatric Nursing
5. Advanced Technology in Pediatric Intensive Care
6. Pediatric Nursing Chemotherapy Technology
7. Pediatric Cardiovascular Nursing
8. When the Young Die in a High Technology Environment
9. Minimizing the Traumatic Effects for the Child
10. Growth and Development in High Tech Pediatric Nursing
11. Advanced Technology in Nursing Care of the Adolescent
12. Critical Care Concepts for Obstetrical Nurses
13. Nursing Management of High Risk Pregnancy
14. Fetal Monitoring
15. Advanced Care in Labor and Delivery
16. High Technology Trauma Nursing

0. Not Included in Grant

EDUCATIONAL NEEDS ASSESSMENT
JANUARY, 1990
LABOR AND DELIVERY

In an effort to fill the needs of all of our nurses, I would like your input. Please take a couple minutes to fill out this assessment. I appreciate and truly need your ideas and comments.

Thank you

Please choose 10 topics that you would like to have discussed at short courses over the next year.

2	a.	Diagnostic maternal/fetal evaluation
10	b.	Ultrasound in High Risk Obstetrics
10	c.	Perinatal infection
2	d.	Infection control: OB/GYN
4	e.	PROM
4	f.	Premature labor and management
3	g.	Postmature pregnancy
5	h.	Third trimester Bleeding
9	i.	Diabetes in pregnancy
3	j.	Genetic counseling
24	k.	Legal aspects of OB/GYN practice
1	l.	Multiple gestation
10	m.	Fetal Alcohol Syndrome
2	n.	Perinatal bereavement
0	o.	Induction of labor
10	p.	Terbutaline pump
2	q.	Adolescent pregnancy
4	r.	Emergency delivery
19	s.	DIC
11	t.	Pulmonary edema
10	u.	Newborn resuscitation
5	v.	PCA Pump
18	w.	Hemodynamic monitoring
1	x.	Assessment of the female reproductive system
1	y.	Ectopic pregnancy
7	z.	Fetal monitoring update
8	aa.	Rh incompatibility
7	bb.	Medical diseases during pregnancy
15	cc.	AIDS in pregnancy
2	dd.	Physical assessment update
0	ee.	Nipple Stimulation for CST
16	ff.	HELLP Syndrome
6	gg.	Psychosocial aspects of high risk pregnancy
0	hh.	The relinquishing mother
6	ii.	Amnioinfusion
13	jj.	Chorionic villus sampling
9	kk.	EKG review
3	ll.	Lamaze update
15	mm.	Amniotic fluid embolus

4	nn.	Surgical asepsis
10	oo.	Ventilator management
4	pp.	Trauma in pregnancy
4	qq.	CPR of the pregnant woman
0	rr.	The battered woman
14	ss.	Burnout (nursing)
10	tt.	ABG interpretation
1	uu.	Hypertensive crisis during pregnancy
0	vv.	Asthma in pregnancy
1	ww.	Postpartum hemorrhage
4	xx.	Congenital Anomalies
7	yy.	Drug abuse in Pregnancy
3	zz.	Newborn assessment
2	aaa.	Neonatal thermoregulation
0	bbb.	Hypoglycemia in the newborn
10	ccc.	Intrauterine transfusion
3	ddd.	Cardiac disease in pregnancy
1	eee.	PAR care following cesarean birth

Needs assessments handed out 40
Needs assessments handed in 30

EDUCATIONAL NEEDS ASSESSMENT
JANUARY, 1990
LABOR AND DELIVERY

Courses in the Educational Package that address the Needs Assessment.

a.	12,13,14,15	aa.	12,13,15	aaa.	
			15		
b.	15,12,13	bb.	12,13,15	bbb.	
			15		
c.	12,13,15	cc.	15	ccc.	
			15		
d.	12,13,15	dd.	15	eee.	
			15		
e.	12,13,14,15	ee.	15		
f.	12,13,14,15	ff.	12,13,15		
g.	12,13,15	gg.	12,13		
h.	12,13,15	hh.	0		
i.	12,13,15	ii.	15		
j.	0	jj.	15		
k.	12,13,14,15	kk.	0		
l.	15	ll.	15		
m.	15	mm.	15		
n.	12,13,15	nn.	15		
o.	14,15.	oo.	0		
p.	12,13,15	pp.	0		
q.	11,13	qq.	0		
r.	15	rr.	0		
s.	12,13,15	ss.	0		
t.	12,13,15	tt.	15		
u.	15	uu.	12,13,15		
v.	15	vv.	12,13,		
w.	12,13,15	ww.	12,13,15		
x.	12,13,15,16	xx.	0		
y.	12,13,16	yy.	15		
z.	14	zz.	15		

GRANT COURSES

1. Advanced Technology in Neonatal Intensive Care
2. Neonatal Cardiac Intensive Care
3. Extracorporeal Membrane Oxygenation
4. Advanced Technology in Pediatric Nursing
5. Advanced Technology in Pediatric Intensive Care
6. Pediatric Nursing Chemotherapy Technology
7. Pediatric Cardiovascular Nursing
8. When the Young Die in a High Technology Environment
9. Minimizing the Traumatic Effects for the Child
10. Growth and Development in High Tech Pediatric Nursing
11. Advanced Technology in Nursing Care of the Adolescent
12. Critical Care Concepts for Obstetrical Nurses
13. Nursing Management of High Risk Pregnancy
14. Fetal Monitoring
15. Advanced Care in Labor and Delivery
16. High Technology Trauma Nursing

0. Not Included in Grant

COURSE SCHEDULE (Contd.)

WEEK 9

March 25, 1991 - CR 1 & 2
Stress
Anesthesia
Trauma Series - Units 3 & 5

March 27, 1991 - CR 1 & 2
Organ Procurement
Orthopedic Assess. & Dx
Trauma Series - Units 6 & 7

WEEK 10

April 1, 1991 - CR 1 & 2
Renal Assess & Dx

April 3, 1991 - CR 1 & 2
Hematology/Oncology Assess. & Dx

WEEK 11

April 8, 1991 - CR 1 & 2
Endocrine Assess. & Dx

April 10, 1991 - Conf. Dining Rm
Infectious Concerns
Trauma Series - Unit 4

WEEK 12

April 15, 1991 - CR 1 & 2
GI & Nutrition
Transport
Trauma Series - Units 8 & 9

April 17, 1991 - CR 1 & 2
Post Test

ARNOLD PALMER HOSPITAL FOR CHILDREN AND WOMEN
VALENCIA COMMUNITY COLLEGE

ADVANCED TECHNOLOGY

IN

PEDIATRIC INTENSIVE CARE

Beginning January 21, 1991
APH Conference Dining Room

LVEDP VSD IABF
DKA CI
ICP SWAN
TET CPAP ASP
CVP PDA
PALS ECMO
PEEP PCWP
LAP CHF IMV
RAP TGV PE
CPP
CO ECG

ATTACHMENT M

COURSE DESCRIPTION

This course designed for graduate and registered nurses will provide the advanced knowledge necessary for the care of children in the Pediatric ICU. Emphasis will be placed on pediatric assessment and intervention. A systems approach will provide a background of anatomy, physiology, pathophysiology, pharmacology and technology needed to function in the Pediatric ICU. Skills labs will be directed at assessment and technical skills specific to the critically ill child. This course is designed to provide the nurse without pediatric critical care experience, the knowledge and skills necessary to practice in the Pediatric ICU. The nurse with experience will become familiar with the policies and procedures specific to our Pediatric ICU.

COURSE OBJECTIVES

Upon successful completion of the course, the nurse will be able to:

1. Perform a comprehensive head-to-toe assessment of the critically ill child.
2. Utilize Pediatric ICU documentation tools.
3. Identify growth and development needs of the Pediatric ICU patient and incorporate these needs into their care.
4. Safely operate equipment necessary for the care of the critically ill child.
5. Utilize the nursing process by assessing, planning, implementing and evaluating the child with:
    a. Respiratory Dysfunction
    b. Cardiovascular Dysfunction
    c. GI Dysfunction
    d. Renal Dysfunction
    e. Metabolic Dysfunction
    f. Heme/ONC Dysfunction
    g. Neurological Dysfunction
    h. Musculoskeletal Dysfunction
    i. Infectious Process
6. Demonstrate the nursing responsibility regarding fluid therapy initiation and maintenance, including the recognition of abnormal laboratory values.
7. Correctly administer pharmacologic agents to the child, identifying the indications, precautions and side effects of the drug.
8. Exhibit proficiency in initiating a Code-45 and follow PALS guidelines in an arrest situation.
9. Describe the assessment and management of pediatric trauma in the acute phase as a systems approach.
10. Explain the roles of the following support services:
    a. Clergy
    b. Child Life
    c. Occupational & Physical Therapy
    d. Social Services
11. Define and discuss the clinical diagnosis and nursing management of the child with congenital heart disease.
12. Describe the nursing management and presentation of neurological impairment peculiar to children.
13. Differentiate between airway management of the child with adequate ventilatory effort and that of inadequate ventilatory effort.

COURSE INFORMATION

Lectures - will be presented by nurses, physicians and other health care specialists.
Textbook - Nursing Care of the Critically Ill Child by Mary Fran Hazinski.
Admission Criteria - Any R.N. or LPN currently employed by ORMC (APH, St. Cloud, Sand Lake).

Class Time: January 21 - April 17, 1991, Monday & Wednesday, 12 weeks, 3:30-6:30 p.m.
Come Early to Register: Class will start on time.

****

The Pediatric Advanced Life Support course will require a separate registration and fee. For further information contact: Joe Bob Pearce, RN
Pediatric Critical Care Educator
APH - ext. 5890 or 1450

Continuing Education Hours: 53.5

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COURSE SCHEDULE

WEEK 1

January 21, 1991 - Confer. Dining Rm
    Introduction
    Pretest
    Initiating Codes

January 23, 1991 - CR 1 & 2
    Anatomical & Physiological Differences in Children

WEEK 2

January 28, 1991 - CR 1 & 2
    Risk Management
    Growth & Development

February 4, 1991 - CR 1 & 2
    Fluid and Electrolytes

WEEK 3

February 11, 1991 - CR 1 & 2
    Diagnostics
    EKG

February 13, 1991 - Tower 6 CR
    Blood Gases
    Invasive Monitoring

WEEK 4

February 18, 1991 - CR TBA
    PALS

February 20, 1991 - CR TBA
    PALS

WEEK 5

February 25, 1991 - CR TBA
    PALS

February 27, 1991 - CR TBA
    PALS

March 1, 1991 - CR TBA
    PALS

WEEK 6

March 4, 1991 - CR 1 & 2
    Medications and Drips

March 6, 1991 - CR 1 & 2
    Respiratory Assess. & Dx

WEEK 7

March 11, 1991 - CR 1 & 2
    Cardiovascular Assess. & Dx

March 13, 1991 - Conf. Dining Rm
    Surgical Assess. & Dx
    Trauma Series - Units 1 & 2

WEEK 8

March 18, 1991 CR 1 & 2
    Shock Assess. & Dx
    Neuro

March 20, 1991 - CR 1 & 2
    Psycho/Social Resources
    Pediatric Clergy
    Child Life - OT/PT

ATTACHMENT N

Valencia Community College Nursing Program and The Arnold Palmer Hospital for Children and Women have identified a need for the education of skilled nursing specialists who perform high technology critical care skills in pediatric, neonatal and obstetric health care units.

Course information: Sixteen courses have been identified to enhance the knowledge of the nurses at The Arnold Palmer Hospital for Children and Women and in the Central Florida area, in order to meet highly specialized skills needed in caring for high risk patients.

Primary objectives: To increase in-depth theoretical and practical knowledge in the specialized nursing care areas of pediatric, obstetric and neonatal nursing and to care for the patient needing high tech skills.

All programs will be held at The Arnold Palmer Hospital for Children and Women.

OPPORTUNITIES FOR CAREER DEVELOPMENT AND CONTINUING EDUCATION

CONTINUING EDUCATION COURSE OFFERINGS

The following course offerings are designed to meet the needs of nurses and health care professionals in the Central Florida area providing care to patients in high tech obstetrical, neonatal and pediatric settings.

Cardiac Intensive Care: The Neonatal Patient - The Pediatric Patient
April 19 and 20, 1990

Emphasis will be placed on the technical knowledge to care for the neonate, infant, and child requiring open heart surgery.

CEU's: 12.0

When the Young Die in a High Technological Environment
January 18, 1991

Emphasis is to provide knowledge and skills to care for children who are terminally ill.

CEU's: 6.0

Minimizing the Traumatic Effects for the Child
April 27, 1990

Emphasis will be to explore the effect of hospitalization on children.

CEU's: 5.5

Growth and Development in High Tech Pediatric Nursing
April 25 and 26, 1991

Emphasis will be on dealing with developmental issues of acute and chronically ill children.

CEU's: 10.0

Advanced Technology in Nursing Care of Adolescents
December 7, 1990

Emphasis will be on the knowledge needed to deal with acute and chronically ill adolescents.

CEU's: 6.0

Critical Care Concepts for Obstetrical Nurses
February 13, 14 and 15, 1991

Emphasis is on knowledge and skills for obstetrical critical care nursing.

CEU's: 21.0

Nursing Management of the High Risk Pregnancy
November 7 and 8, 1990, April 10 and 11, 1991

Emphasis is on pathophysiology, assessment and technology required to provide care for high risk pregnant patients.

CEU's: 12.0

Fetal Monitoring
June 12 and 13, 1990

Emphasis is on interpretation and intervention strategies for basic and advanced fetal monitoring.

CEU's: 12.0

FOR FURTHER INFORMATION CONTACT:

Joanne Wit, BSN, MSN, Ed.S.
Professor of Nursing
Valencia Community College
(407) 299-5000, ext. 1274

Kay Taylor, RN, BSN
Educational Coordinator for Pediatrics
The Arnold Palmer Hospital for Children and Women
(407)649-9111, ext. 5786

Wendy Sullivan, RN, BSN
Educational Coordinator for Neonatal
The Arnold Palmer Hospital for Children and Women
(407) 649-9111, ext. 5976

Nancy Leighton Robinson, RN, MSN
Educational Specialist for Obstetrical Services
The Arnold Palmer Hospital for Children and Women
(407) 649-1111, ext. 5558

CLINICAL ADVANCEMENT COURSE OFFERINGS

Earn while you learn. The following courses are designed to facilitate the orientation process to a new speciality or the high tech care delivered at The Arnold Palmer Hospital. To be accepted in these courses, nurses are to be employees of the Arnold Palmer Hospital.

Advanced Technology in Neonatal Intensive Care. **January 29, 1990, May 21, 1990, Winter 1991**

Emphasis is placed on the physiology, assessment and the high technology required to work in this specialized area. 12 week course, 16 credits

Advanced Technology in Pediatric Nursing **May 21, 1990, Winter 1991**

Emphasis is placed on anatomy, physiology, assessment and new technology needed in caring for children on the pediatric unit. 8 week course, 10 credits

Advanced Technology in Pediatric Intensive Care **September 10, 1990**

Emphasis is placed on anatomy, physiology, assessment and new technology needed in the PICU. 10 week course, 16 credits

Advanced Nursing Care in Labor and Delivery **May 21, 1990, Winter 1991**

Emphasis is on anatomical, physiological and patho-physiological adaptations during the intrapartal period in a high tech environment. 12 week course, 16 credits

High Tech Emergency/Trauma Nursing **April 9, 1990**

Focus on emergency care of the critically ill/injured adult/pediatric patient. Emphasis on assessment, treatment, and priority setting. Employed by Orlando Regional Medical Center, Level I Trauma Center. 6 week course, 8 credits

EXPANDED NURSING ROLES

The following courses are designed to add to the skills of the nurse working in high tech pediatric and neonatal patient care settings. To be accepted in these courses nurses are to be employees of the Arnold Palmer Hospital.

Extracorporeal Membrane Oxygenation (ECMO) **May 14-25, 1990, Winter 1991**

Emphasis is placed on knowledge and skills to care for neonates requiring ECMO. CEU's: 40.0

Pediatric Nursing Chemotherapy Technology **October 8, 10, 15, 17, 22 and 24, 1990**

Emphasis is on advanced knowledge and skill needed to administer chemotherapy and care for these children. CEU's: 10.0

GRANT FUNDING obtained from the U.S. Department of Education under the Cooperative Demonstration Program (High Technology). Total Project Cost $434,298. The federal portion of total project cost is 63%. Matching comprises 37% of project costs.

HIGH TECH

PEDIATRIC, MATERNAL AND NEONATAL NURSING

OPPORTUNITIES FOR CAREER DEVELOPMENT AND CONTINUING EDUCATION

VALENCIA
Community College

and

Arnold Palmer Hospital
for Children & Women
A Division of Orlando Regional Medical Center

VALENCIA
Community College
P.O. Box 3028
Orlando, FL 32802

an equal opportunity institution

Non-Profit Organization
U.S.POSTAGE
PAID
Permit No. 3678

ATTACHMENT O

ARNOLD PALMER HOSPITAL FOR CHILDREN AND WOMEN
VALENCIA COMMUNITY COLLEGE

CHEMOTHERAPY

Course Description: Overview of pediatric cancers, etiology, treatment and sequelae. Emphasis on chemotherapeutic drugs with nursing implications.

Dates: (1) October 8, 10, 15, 17, 22, 24
(2) November 26, 28, December 3, 5, 10, 12

Time: 1600 - 1800
Place: Tower 6 Conference Room

Content: **SESSION I** - Introduction, Pre-test Review, Pediatric Cancers, Review of Self Learning Packet

SESSION II - Quiz on Self Learning Packet, POG Program: Protocols, Road Maps, Schemes, Flow Sheets, Documentation, Calculation of Dosages, Chemotherapy: Classifications, Groups, Inductions, Dosages, Side Effects, Administration Techniques, Lab Values

SESSION III - Chemotherapy Continued

SESSION IV - Infuse-a-ports / Broviacs, Administration of Blood / Platelets, Nutritional Needs, Resources, Psychosocial needs

SESSION V - Learning Lab: Administration of Chemo Techniques and Check-off Test

SESSION VI - Post Test

Registration

Due October 1 for Class 1, Due November 19 for Class 2

NAME: ____________________ ADDRESS: ____________________

CITY/STATE ____________________ ZIP CODE: ____________________

PHONE # ____________________ WORK EXT: _____ WORK UNIT _______

Registering for Class ________(1) ________ (2)

A CHILD'S HOSPITALIZATION

REGISTRATION

REGISTRATION DEADLINE: APRIL 13, 1990 * REGISTRATION LIMITED TO 40 PARTICIPANTS

NAME: ____________________ BUSINESS PHONE: ____________________

ADDRESS: ____________________ HOME PHONE: ____________________

PLACE OF EMPLOYMENT: ____________________ TITLE: ____________________

SOCIAL SECURITY #: ____________________ SPECIALTY AREA: ____________________

MAIL WITH CHECK TO:
CONTINUING EDUCATION
ORLANDO REGIONAL MEDICAL CENTER
1414 KUHL AVENUE
ORLANDO, FL 32806

REGISTRATION FEE: $35 NON-EMPLOYEE __________ enclosed
$10 ORMC EMPLOYEE __________ enclosed

Continuing Nursing Education
Orlando Regional Medical Center
1414 Kuhl Avenue
Orlando, FL 32806

Non-Profit
Organization
U.S. POSTAGE
PAID
Permit No.3459
Orlando, Florida

A CHILD'S HOSPITALIZATION

MINIMIZING THE TRAUMATIC EFFECTS

FRIDAY, APRIL 27, 1990

ARNOLD PALMER HOSPITAL
FOR CHILDREN AND WOMEN

CLASSROOMS 3 AND 4

COORDINATORS:

LINDA JONES, M.ED.
CHILD LIFE COORDINATOR

KAY TAYLOR, R.N., B.S.N.
EDUCATIONAL COORDINATOR/[illegible]DIATRICS

JOANNE WIT, R.N., M.S.N., ED.S.
HEALTH CARE DEMO PROJECT COORDINATOR

COURSE INFORMATION

Valencia Community College Nursing Program and The Arnold Palmer Hospital for Children and Women have designed a program related to minimizing the traumatic effects of hospitalization on the child. The target audience is the health care professional who provides care to the hospitalized child.

This unique program is formulated to enhance the knowledge of the health care professional concerning the acutely ill child's perception of hospitalization. Emphasis will be to explore the effects of hospitalization on the child.

To create a "Pediatric Setting" and to add to your enjoyment of this program, we ask the following:

1. Dress casually and comfortably to participate in a wide variety of activities.☆
2. Bring a copy of your favorite activity that you have used with children.

☆ We encourage flat shoes and comfortable clothes as "Walk in My Shoes" handicaps may include such experiences as walking on crutches, pushing an IV pole, being in a wheelchair or wearing a leg splint.

COURSE AGENDA

7:30 am	Registration
8:00 am	Introduction and Welcome
8:15 am	Acutely Ill Children - Alleviating Their Fears.....Irene Owens, RN, BSN Exceptional Education Orange County Public Schools
9:00 am	Children Too Become Stressed - How Can You Tell?......Linda Jones, M.Ed Child Life Coordinator Arnold Palmer Hospital
9:45 am	Break
10:00 am	Siblings - They are Often Overlooked Melanie Hall, BA, MA Child Life Specialist H. Lee Moffit Cancer Center Tampa, Florida
10:45 am	Talking with Children & Adolescents - What Works & Doesn't Work Sheri Mosely, BS, CCLS Child Life Specialist Arnold Palmer Hospital
11:30 am	Video - What Does It Mean to "Play"? Stephanie Janssen, BS, CCLS Child Life Specialist Arnold Palmer Hospital
12:00 pm	Picnic Lunch
12:45 pm	"Walk in My Shoes"
1:45 pm	Your Experiences to "Walk in My Shoes" Kay Taylor, RN, BSN Educational Coordinator/Pediatrics Arnold Palmer Hospital
2:15 pm	Break
2:30 pm	Parents at the Bedside - Friend or Foe Beth Wierman Lambert, MSW Pediatric Social Worker Arnold Palmer Hospital

COURSE OBJECTIVES

At the end of the program, the participan will be able to:

1. recognize ways to alleviate the child' fears of the hospital experience.
2. identify the behaviors of the child wh signal stress.
3. recognize the needs of siblings.
4. explore ways of effective communicatio with children and adolescents.
5. recognize the role of play for the child.
6. experience the frustrations of th hospitalized child.
7. recognize the value of parents at th bedside.

COURSE SPECIFICS

Registration:	Limited to 40 participants Deadline April 13, 1990
Fee:	$35 Non-Employee $10 ORMC Employee Includes Lunch
Credit:	7.0 Contact Hours Florida Provider Number 27C0095
Funding:	Grant funding obtained from the U.S. Department of Education under the Cooperative Demonstration Program (High Tech).

CRITICAL CARE CONCEPTS FOR OB NURSES

FEBRUARY 13, 14, 15, 1991

Arnold Palmer Hospital For Women and Children

Co-Sponsored By

Orlando Regional Medical Center

VALENCIA Community College

Continuing Nursing Education
Orlando Regional Medical Center
1414 Kuhl Avenue
Orlando, Florida 32806

Non-Profit
Organization
U S POSTAGE
PAID
Permit No 3459
Orlando Florida

CRITICAL CARE CONCEPTS FOR OB NURSES

REGISTRATION DEADLINE: FEBRUARY 8, 1991 *REGISTRATION LIMITED TO 40

NAME: ______________________ PHONE: (WK) __________ (HM) __________

ADDRESS: ______________________ CITY/STATE/ZIP ______________

EMPLOYER: ______________ TITLE: ______________ SPECIALTY: __________

SOCIAL SECURITY #: ______________ PROFESSIONAL LICENSE #: __________

MAKE CHECK PAYABLE AND MAIL TO:
ORLANDO REGIONAL MEDICAL CENTER
CONTINUING NURSING EDUCATION
1414 SOUTH KUHL AVENUE
ORLANDO, FLORIDA 32806

CRITICAL CARE CONCEPTS FOR OB NURSES

DATES: February 13, 14, 15, 1991

TIMES: Registration - 7:00 a.m.
Program - 8:00 a.m. - 4:30 p.m.

LOCATION: Arnold Palmer Hospital
Classrooms 3 & 4

Parking is available at an on-site garage. Directions are available on request.

FEE: $105.00 - Non-Employees of ORMC
$ 20.00 - ORMC Employees

This program is sponsored in part by a grant through Valencia Community College obtained from the U.S. Department of Education under the Cooperative Demonstration Program (High Technology).

CONTACT HOURS:
21 HOURS of Nursing Credits

PROVIDER #: 27C0095

COORDINATED BY:

Wendy Sullivan, RN, BSN
Manager of Health Care Education
Arnold Palmer Hospital

Melanie Reis, RN, MSN
Clinical Nurse Specialist
Labor and Delivery
Arnold Palmer Hospital

Joanne Wit, RN, MSN, EDS
Valencia Community College

CRITICAL CARE CONCEPTS FOR OB NURSES

This advanced course will prepare obstetric nurses to provide care for critically ill mothers during antepartum, intrapartum, and immediate post-partum. Interpretation of ECG's, ABG's and hemodynamic monitoring will be included, in addition to post anesthesia recovery nursing interventions. Participants will have an opportunity for a "hands on" learning lab experience to set up, calibrate and interpret machine readings.

OBJECTIVES

The participant will be able to:

1. State current management strategies for the high-risk obstetrical patient.
2. Discuss nursing care for the high-risk post-operative patient.
3. Explain the principles of hemodynamic monitoring.
4. Demonstrate the ability to perform specific critical care skills.
5. Develop plans of care for the patient with HELLP Syndrome, DIC and Hypertensive disorders.

Speakers will include local experts in Intensive Care Obstetrics.

TOPICS

Day 1

* Hypertensive Disorders / Nursing Care
* HELLP Syndrome
* DIC
* Critical Physical Assessment Technique
* Skills Stations:
    ABG Interpretation
    CPR of the Pregnant Patient
    Case Presentations

Day 2

* Amniotic Fluid Emboli
* Hemorrhage / Shock
* Post-operative Care of the High Risk Patient
* Invasive Hemodynamic Monitoring
* Skills Stations:
    Ventilator Dependent Patient
    Trouble Shooting Invasive Lines
    Case Presentations

Day 3

* Diabetes Mellitus:
    Preventing Fetal Compromise
* Systemic Lupus Erythematosis:
    Managing the Acute Crisis
* Challenge of Multiple Births
* Care of the Cardiac Patient
* Dealing with Loss

For more information, please contact Marge Duchano at 841-5144.

Orlando Regional
Medical Center

EMERGENCY TRAUMA
COURSE

Beginning Wednesday, August 1, 1990

ORMC Red Auditorium

VALENCIA
Community Col

Continuing Nursing Education
Orlando Regional Medical Center
1414 Kuhl Avenue
Orlando, FL 32806

NON PROFIT
ORGANIZATION
U.S. POSTAGE
PAID
ORLANDO, FLORIDA
PERMIT NO. 3459

REGISTRATION: EMERGENCY TRAUMA COURSE

August 1 - September 9, 1990. Registration Deadline: July 25, 1990.

Name: ____________________ RN [ ] LPN [ ] License: ____________

Address: ____________________ City/Zip: ____________

Telephone: (Work) __________ (Home) __________ Fee Enclosed: [ ] $150.

Place of Employment: ____________________ Unit: ____________

Please make checks payable to: Orlando Regional Medical Center
and mail to: Continuing Nursing Education
1414 Kuhl Avenue
Orlando, FL 32806

(Partial funding provided by U.S. Department of Education under a Cooperative Demonstration Program (High Tech) Grant.)

THE EMERGENCY TRAUMA COURSE

The Emergency Trauma Course is a comprehensive course that focuses on the emergency management of the ill/injured adult/pediatric patient in the emergency department.

The course provides classroom lectures with optional clinical experiences that emphasize the role of the nurse as an integral part of the emergency/trauma team.

OBJECTIVES

At the end of this program, the participant should be able to:

1. Perform the initial assessment of an emergency patient.
2. Determine priorities of care.
3. Plan for the care of the ED patient including appropriate nursing diagnosis.
4. Analyze the pathophysiologic changes related to key signs and symptoms.
5. Determine patient classifications based on needs and resources for triage.
6. Recognize the importance of standing orders and patient education.
7. Prioritize and perform care of the multiple trauma patient.

LECTURES

Classroom lectures will be presented by nurses, physicians and other specialists. Emphasis of lectures will be on nursing management with appropriate attention given to related medical management.

CLINICAL EXPERIENCE

Opportunities will be provided for the participants to gain practical experience in the emergency department. These opportunities will be available in addition to the scheduled lecture hours.

COURSE DATES

The course will begin on August 1, 1990 and meet every Wednesday from 6:00 p.m. to 9:00 p.m. for eight weeks. The "Clinical Experience" is voluntary and will be on other days of the week. You will be able to sign up for the "Clinical Experience" on August 1.

CONTACT HOURS

This course has been approved for 24 contact hours by Valencia Community College. Additional hours will be available for the "Clinical Experience."

TEXTBOOK

An emergency nursing textbook will be used and will be available at no cost to ORMC employees, who attend the entire course (A $50. deposit will be required).

Non ORMC employees must purchase the book; the cost is approximately $50. The text will be available at the first class.

REGISTRATION

The registration deadline is July 25, 1990. Class size is limited. FEES:

ORMC Employees $ 0.
Non Employees $150.(plus book)
Payable to ORMC.
$12.50 Personal Liability Insurance payable to VCC (for clinical experience only).

ADMISSION CRITERIA

1. Current licensure as a registered or practical nurse.

2. EKG and ACLS helpful (not required).

FOR MORE INFORMATION

Marsha Bounds, RN, BSN, CEN
Course Coordinator
(407) 841-5111, ext. 5906

When The Young Die in a High Tech Setting

REGISTRATION

Registration Deadline: January 7, 1991

Registration Limited to 40

Name: ______________ Business Phone: ______________

Address: ______________ Home Phone: ______________

Place of Employment: ______________ Title: ______________ Specialty Area: ______________

Social Security #: ______________ License #: ______________

Amount Enclosed

- ___ $30.00 Non employee
- ___ 10.00 ORMC employee

Mail with check to
Continuing Education ORMC
1414 S. Kuhl Avenue
Orlando, FL 32806

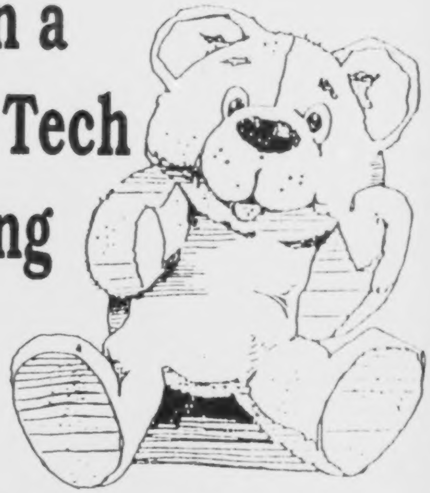
Non-Profit Organization
U.S.POSTAGE
PAID
Permit No. 3678
Orlando, Florida 32802-3028

VALENCIA
Community College
Post Office Box 3028
Orlando, Florida 32802-3028

An equal opportunity institution

Arnold Palmer Hospital
for Children & Women
A Division of Orlando Regional Medical Center

When The Young Die in a High Tech Setting



Arnold Palmer Hospital for Children and Women

January 18, 1991

VALENCIA
Community College

Agenda

8:30 a.m.	Registration
Breakfast donated by TransLife	
9:00 a.m. - 9:10 a.m.	Welcome
9:10 a.m. - 10:30 a.m.	The Abused Child
10:30 a.m. - 10:45 a.m.	Break
10:45 a.m. - 12:05 p.m.	Cultural and Religious Aspects
12:05 p.m. - 1:00 p.m.	Lunch
1:00 p.m.- 2:25 p.m.	Ethical Dilemma: Quality of Life
2:25 p.m. - 2:35 p.m.	Break
2:35 p.m. - 3:55 p.m.	Organ Donation / Transplant
3:55 p.m. - 4:00 p.m.	Evaluation and Certificates

Course Specifics

Location: Arnold Palmer Hospital for Children and Women
1414 S. Kuhl Avenue
Orlando, FL 32806
Registration: Limited to 40
Deadline: January 18, 1991
Credit: 6 contact hours

Florida Provider # 27C 0095

Fee: $30.00 Non-employee
10.00 ORMC employee

Funding

Partial funding provided by U.S. Department of Education under a Cooperative Health Care Demonstration Grant.

Coordinated by

Health Care Education Department Arnold Palmer Hospital for Children and Women

Joanne Wit, RN, MSN, EdS
Valencia Community College

When The Young Die in a High Tech Setting

COURSE DESCRIPTION

This program is designed to assist nurses and other members of the health care team to gain an insight into the process of dying in a high tech setting.

Emphasis will be placed on cultural and religious aspects that influence families perceptions. The conference will also deal with the sequelae of child abuse, perceptions and decisions related to organ donation and transplant and ethical issues related to the quality of life.

Objectives

The participant will be able to:

- Recognize nurse's role when working with the abused child and his or her family.
- Gain insight into the diverse behavior related to dying as influenced by cultural and religious beliefs.
- Examine ethical issues related to quality of life in the high tech environment.
- Discuss the perceptions and decisions facing families concerning organ donation and transplant.

ATTACHMENT P

VALENCIA COMMUNITY COLLEGE

ORLANDO REGIONAL MEDICAL CENTER

COURSE EVALUATION

CHEMOTHERAPY 10/26 - 12/12/90

		AGREE	DISAGREE	N/A
1.	My skills and competencies in reasoning problem solving improved.	5		1
2.	I learned a great deal in this course.	6		
3.	The pace of the course was about right.	6		
4.	I plan to use this informatin in my work situation.	6		
5.	The speakers were knowledgable and well prepared.	6		
6.	The written materials were useful and understandable.	5	1	
7.	The content related to the objectives.	6		
9.	Questions and comments from participants were welcomed.	6		
10.	The course was taught at on appropriate level of difficulty.	6		
11.	I was able to meet the objectives of the course.	6		

12. Please circle your overall evaluation of the course.
Excellent-3 Good-3 Fair Poor

13. What aspects of the course did you like the least and why?
    1. Unable to memorize drugs due to lack of time - will rely on chemo cards.
    2. Booklets a great asset, but did not necessarily follow the lecture which made the course a little difficult to follow.

14. What aspects of the course did you like the most and why?
    1. Background information of tumors
    2. Jo Kelly - she is very knowledgable. Her knowledge of current research and parent teaching strategies is extremely helpful.

SUMMARY

VALENCIA COMMUNITY COLLEGE
STUDENT EVALUATION OF INSTRUCTION

Course: Ped Specialty Date: 7/17/90

EFFECT OF COURSE

	Strongly Agree SA	Agree A	Neutral N	Disagree D	Strongly Disagree SD	Not Applicable NA
My skills and competencies in reasoning and problem solving improved	1	6	☐	☐	☐	☐
I learned a great deal in this course	2	5	☐	☐	☐	☐
I was encouraged to try out new ideas or attempt unique solutions	1	5	1	☐	☐	☐

INSTRUCTOR BEHAVIOR

	SA	A	N	D	SD	NA
The instructor showed concern about the effectiveness of his/her teaching	1	5	1	☐	☐	☐
The instructor made good use of examples and illustrations	☐	6	☐	☐	☐	1
The instructor was considerate	4	4	☐	☐	☐	☐
The instructor was available for help	3	2	1	☐	☐	☐
The instructor was interested in the student	3	4	☐	☐	☐	☐
The instructor was well informed on the material presented	2	4	1	☐	☐	☐
The instructor gave explanations which were clear and to the point	☐	6	1	☐	☐	☐
The chalkboard and other audio visual aids were used effectively	2	5	☐	☐	☐	☐
The instructor made clear how each topic fit into the course	1	5	1	☐	☐	☐
Effective note taking was possible	☐	2	4	1	☐	☐
The instructor had some bothersome habits (please comment)						

EVALUATION

	SA	A	N	D	SD	NA
There was sufficient advance notice of tests and other assignments	4	3	☐	☐	☐	☐
The instructor clearly indicated what material the test would cover	2	5	☐	☐	☐	☐
Adequate time was given to complete tests and other assignments	5	2	☐	☐	☐	☐
Questions and comments from students were welcomed	4	3	☐	☐	☐	☐

COURSE CONTENT

	SA	A	N	D	SD	NA
The amount of work required in this course was excessive	☐	☐	☐	5	2	☐
The course was taught at an appropriate level of difficulty	2	5	1	1	☐	☐
The instructor related the material of this course to the clinical setting		6	1	☐	☐	☐
The course emphasis was on learning and understanding	4	3	☐	☐	☐	☐
The course material seemed relevant and worthwhile	2	3	2	☐	☐	☐

TEXTBOOKS, MATERIALS & SUPPORT SERVICES

The text was readable and understandable	☐	6	1	☐	☐	☐
Although the text was required it was not necessary for a good grade	☐	1	☐	4	☐	1
There was too much overlap between textbook & lectures	☐	1	☐	2	1	3

GENERAL COMMENTS:

2 - **Enjoyed Course.**
Stronger base of knowledge.
Doctors lectures good, they didn't talk down to us.
Nursing & ancillary were knowledgable.
More could be learned at FL. Elk's Hospital.
Would like more time given to phys. lectures.
Less time and documentation, care plan - learn this with experience on the unit.
Would like 1 week class; one week clinical for consistency of more tha
2 days clinical.
3 - Orthopedic nurse was not worthwhile, negative.
2 - Dr. Milav a great lecturer.
Jo Kelly / Oncology was good.
Dr. Lopez - good
Better to have 3-4 wk course then clinical for 4 weeks.
Good at integrating textbook knowledge with frequent diagnosis seen in this setting.
Good opportunity to build teamwork between phys. and nurse.
2 - Joan Carl - supportive , encouraged questions & resolved concerns in a timely manner.
Focus more on nursing intervention.
Great opportunity to practice peds more effectively.
Need to relate disease process to nursing care.

VALENCIA COMMUNITY COLLEGE
STUDENT EVALUATION OF INSTRUCTION

Course: Labor and Delivery Date: July 13, 1990

EFFECT OF COURSE

	Strongly Agree SA	Agree A	Neutral N	Disagree D	Strongly Disagree SD	Not Applicable NA
My skills and competencies in reasoning and problem solving improved	7	2	☐	☐	☐	☐
I learned a great deal in this course	8	1	☐	☐	☐	☐
I was encouraged to try out new ideas or attempt unique solutions	4	5	☐	☐	☐	☐

INSTRUCTOR BEHAVIOR

	SA	A	N	D	SD	NA
The instructor showed concern about the effectiveness of his/her teaching	5	4	☐	☐	☐	☐
The instructor made good use of examples and illustrations	5	4	☐	☐	☐	☐
The instructor was considerate	5	4	☐	☐	☐	☐
The instructor was available for help	6	3	☐	☐	☐	☐
The instructor was interested in the student	6	3	☐	☐	☐	☐
The instructor was well informed on the material presented	7	2	☐	☐	☐	☐
The instructor gave explanations which were clear and to the point	5	4	☐	☐	☐	☐
The chalkboard and other audio visual aids were used effectively	5	4	☐	☐	☐	☐
The instructor made clear how each topic fit into the course	5	3	1	☐	☐	☐
Effective note taking was possible	5	3	☐	1	☐	☐
The instructor had some bothersome habits (please comment)						

EVALUATION

	SA	A	N	D	SD	NA
There was sufficient advance notice of tests and other assignments	5	4	☐	☐	☐	☐
The instructor clearly indicated what material the test would cover	7	2	☐	☐	☐	☐
Adequate time was given to complete tests and other assignments	6	3	☐	☐	☐	☐
Questions and comments from students were welcomed	7	2	☐	☐	☐	☐

COURSE CONTENT

	SA	A	N	D	SD	NA
The amount of work required in this course was excessive	1	☐	2	4	2	☐
The course was taught at an appropriate level of difficulty	3	4	1	☐	1	☐
The instructor related the material of this course to the clinical setting	2	7	☐	☐	☐	☐
The course emphasis was on learning and understanding	5	4	☐	☐	☐	☐
The course material seemed relevant and worthwhile	5	4	☐	☐	☐	☐

TEXTBOOKS, MATERIALS & SUPPORT SERVICES

The text was readable and understandable	7	2	☐	☐	☐	☐
Although the text was required it was not necessary for a good grade	☐	☐	4	4	1	☐
There was too much overlap between textbook & lectures	☐	1	2	5	1	☐

GENERAL COMMENTS:

2 - Alternate every other week with clinicals
Enjoyed Class
Helpful for clinical
3 - Instructors all well informed and motivated
3 - Try three (3) days week class, 2 days clinical
Helpful in adapting to floor
2 - Barbie was very good

VALENCIA COMMUNITY COLLEGE

ORLANDO REGIONAL MEDICAL CENTER

COURSE EVALUATION

		AGREE	DISAGREE	N/A
1.	My skills and competencies in reasoning problem solving improved.	46	0	0
2.	I learned a great deal in this course.	49	0	0
3.	The activities I participated in helped me understand Emergency/Trauma Care.	42	0	4
4.	The length of the course was about right.	40	5	0
5.	The pace of the course was about right.	42	3	0
6.	I plan to use this informatin in my work situation.	45	1	0
7.	The speakers were knowledgable and well prepared.	46	0	0
	The textbook was readable and understandable.	46	0	0
9.	The content related to the objectives.	40	0	1
10.	Questions and comments from participants were welcomed.	45	0	0
11.	The course was taught at on appropriate level of difficulty.	42	3	0
12.	I was able to meet the objectives of the course.	46	0	0

13. Please circle your overall evaluation of the course.

Excellent	Good	Fair	Poor
30	20	0	0

14. What aspects of the course did you like the least and why?

2-Entire program well presented
EKG-presented to rapidly
Give over shorter period of time
Nothing I disliked
Course was great
Cardiac section - too fast
Reading straight from book
More convenient time

Demos on low floor hard to see
Oncology emergencies
Cardiac EKG
Cardiac speaker thought we knew more t
we did
Some speakers read
More time needed

15. **What aspects of the course did you like the most and why?**

Books, Visual Aids, Clinical time in ER, Triage Seminars, Speakers, Videos, Pediatric differences, length of course, pace, everything, OB Emergencies, Peds Trauma, Role Playing, Enjoyed Jan's lecture, Enjoyed K. Warren, Assessment and interventions.

16. **Was the environment suitable for the program?**

4-Cold at times, Relaxed environment made for good learning
Yes, Excellent.

17. **What topics would you like to know more about?**

Take Trauma course next, PALS , Pediatric Drugs and dosages, Hemodynamic monitoring, further pediatric trauma, more hands on, Peds Emergencies, Cardiac emergencies, step by step pictures of a true trauma, EKG, Fetal monitoring, Trends in trauma - national organ donation.

18. **Other comments:**

Excellent! Presented by professionals
Should be offered again
We'll benefit alot from book
Very informative and helpful
Great course but too short
Well organized, excellent speakers
Suitable level
Enthusiasm of speakers motivated learners
Great opportunity to learn and get hands on experience
I will use everything I learned in my work situation
Book-too much nursing diagnosis, not enough etiology and treatment
Increased my knowledge base

VALENCIA COMMUNITY COLLEGE

ORLANDO REGIONAL MEDICAL CENTER

COURSE EVALUATION

Nursing Management of High Risk Pregnancy: Day 1

		AGREE	DISAGREE	N/A
1.	My skills and competencies in reasoning problem solving improved.	38	1	1
2.	I learned a great deal in this course.	39	1	
3.	The pace of the course was about right.	40		
4.	I plan to use this information in my work situation.	38		2
5.	The speakers were knowledgeable and well prepared.	40		
6.	The written materials were useful and understandable.	40		
7.	The content related to the objectives.	40		
8.	Questions and comments from participants were welcomed.	40		
9.	The course was taught at an appropriate level of difficulty.	39	1	
10.	I was able to meet the objectives of the course.	40		

11. Please circle your overall evaluation of the course.

19	Excellent
21	Good
	Fair
	Poor

12. What aspects of the course did you like the least and why?
1 Prenatal development
2 Psychology Aspects
1 Biophysical profile
2 Ultrasound (over my head)
1 Reading lists of written material

13. What aspects of the course did you like the most and why?
3 Prenatal overview
2 Risk factors
11 Sharing of High Risk experiences
1 Outgoing interesting personalities of instructors
1 Using examples on overhead with class participation
4 All
3 All sound, interesting topics
6 All speakers interesting. Kept pace going
3 Speakers knowledgeable
2 Sonography
2 Stress testing
1 Psychosocial
1 Presented in an easy to understand manner
2 Antepartum testing
2 Specific "to do's"

14. Was the environment suitable for the program?
16 Yes
12 Need tables
8 Chairs uncomfortable
1 OK
3 Cold in a.m.
1 No
3 Room temperature perfect

15. What topics would you like to know more about?
1 Specific High Risk problems
1 Fetal anomalies - when and why
1 HELLP Syndrome
1 Diabetes
1 PIH
1 Dealing with grief process
2 Infertility
1 Educating the patient

16. Other comments:
1 Need to cover monetary difficulties and resources
1 Excellent syllabus
3 Morning breakfast and snack - great
2 Speaker system would be helpful
1 Would like group activity
1 Well organized program

11/90 cdd

VALENCIA COMMUNITY COLLEGE

ORLANDO REGIONAL MEDICAL CENTER

COURSE EVALUATION

Nursing Management of High Risk Pregnancy: Day 2

		AGREE	DISAGREE	N/A
1.	My skills and competencies in reasoning problem solving improved.	43	1	1
2.	I learned a great deal in this course.	44	2	
3.	The pace of the course was about right.	45	1	
4.	I plan to use this information in my work situation.	44		2
5.	The speakers were knowledgeable and well prepared.	45		
6.	The written materials were useful and understandable.	45	1	
7.	The content related to the objectives.	45		
8.	Questions and comments from participants were welcomed.	46		
9.	The course was taught at an appropriate level of difficulty.	45	1	
10.	I was able to meet the objectives of the course.	45	1	

11. Please circle your overall evaluation of the course.

17 Excellent
23 Good
1 Fair
___ Poor

12. What aspects of the course did you like the least and why?

4	Dr. Morales' information interesting, but not related to objectives
7	Pre-term labor not covered - need therapies used, not just one persons study - also nursing implications
1	Diabetes too fast
1	Hard to hear Dr. Albritton

13. What aspects of the course did you like the most and why?

18	PIH - Excellent
1	Presentors that took participants into consideration were the best
7	Drug Abuse
5	Diabetic lecture
5	Premature Labor
1	Very good update
1	Knowledgeable speakers
1	Nursing Aspects

14. Was the environment suitable for the program?

1	Excellent
9	Yes
4	Cold
15	Chairs uncomfortable
10	Sometimes difficult to hear
1	Difficult to see screen
1	Larger room

15. What topics would you like to know more about?

1	Dealing with maternity and parenting needs of low socio-economic women
2	DIC/HELLP
1	Acid/Base
1	Other complications
1	Use of abbreviations

16. Other comments:

1	More handouts for diabetic lecture
3	All speakers great
1	All topics were thorough - holistic
1	All topics ran smoothly together
2	All content very informative
1	Enjoyed the speakers answering questions clearly
1	Enjoyed personal experiences shared
1	Dr. Morales excellent
1	Had to write too much
1	Very enjoyable
1	Excellent, well organized
1	Too much information in short time
1	Diabetes lecture - more handouts

11/90 cdd

ATTACHMENT Q

REPORT

OF

INDEPENDENT EVALUATION

Jo Manion
Vice President/Center for Nursing
Florida Hospital Association

June 26, 1991

The following is my evaluation of Valencia Community College's Cooperative Demonstration Program (CFDA No. 84.199A) to demonstrate a cooperative vocational education program focusing on high technology in health care training with Orlando Regional Medical Center. This report is based on my review of the records, examination of the course syllabi, promotional materials, needs assessment surveys and results, and concurrent interviewing of program personnel at both Valencia Community College and Orlando Regional Medical Center in Orlando, Florida.

Proposed Goals of the Program

The goals established for the program included:

1) **To assist Orlando Regional Medical Center in enhancing the skills of currently employed nurses in high-risk hospital pediatric, neonatal and obstetrical units in order to foster career advancement.**
2) **To assist Orlando Regional Medical Center in training newly hired nurses in areas of high-risk pediatric, neonatal and obstetric specialized units for infants, children and mothers at risk.**
3) **To assist in providing the human resources needed in the nation and the region to provide advanced nursing care in highly specialized, high risk health care units.**
4) **To enable Central Florida nurses opportunities to develop and maintain nursing skills in highly specialized areas that enable them to compete successfully at a national level in order to provide advanced nursing care to children and women who are high-risk patients.**
5) **To support the introduction of cost-effective, highly specialized nursing procedures and skills that will promote efficiency and productivity.**
6) **To play a catalytic role in economic growth by developing qualified applicants for new positions in nursing for pediatric, neonatal and obstetric specialized hospital units.**
7) **To serve as a model cooperative vocational training program that will be replicated by other educational institutions and health care facilities.**

Actual Outcomes of the Program

The actual outcomes of this program have been significant. The estimated minimum number of health care employees targetted for participation was 244 with the actual number of employees participating totalling 355. In addition, 131 non-employees from Central Florida attended courses and programs. These enrollment figures reflect the effectiveness of the needs assessment completed and the appropriateness of the educational/training materials developed for the program. Sixteen full courses were developed and offered.

From discussions with ORMC/APH staff and managers, a very positive morale has developed throughout the organization due to management's commitment to this program and their employees. In January 1991 the number of vacant staff positions had diminished and the turnover rate at APH decreased in twelve months from 19% to 13%. Even greater results are anticipated over time.

Benefits have also been noted at Valencia Community College. Available educational dollars went further in meeting community needs. Higher program visibility has resulted in increased admission applications and an increased profile in the community. Faculty members were also able to remain current on nursing procedures and integrate them into the curriculum.

The partnership between Valencia Community College and ORMC has been a win-win relationship from the beginning and continues equally positive after completion of the first year of operation. ORMC personnel were directly involved in determining the needs assessment, the development of instructional materials, the allocation of space and instructional equipment, the scheduling of classes and release time arrangements for student-employees, and a significant portion of the actual instruction. Valencia Community College has been responsive to the needs of ORMC and the student-employees. The assignment of a well-qualified Valencia faculty to an office on the ORMC campus on a full-time basis provided needed space. The Valencia faculty was easily accessible for the advisement and assistance of students and prospective students as well as for routine administrative matters. The Valencia faculty maintained daily communications with the program directors on the Valencia main campus. Frequent face-face contacts also ensured that the feedback link in the communication process was constantly maintained.

The evaluation plan was established in the original proposal and executed throughout the period of the grant. The evaluation process included pre and post testing of students to determine mastery of the course materials, competency based testing of students, student evaluation of the content and instruction of each course, and evaluation of the training conducted by ORMC educators, managers and staff. The results of the evaluations were reviewed concurrently and suggestions for improvement resulted in changes in the program.

The final evaluation of the program content, design and implementation was made by Valencia faculty, ORMC/APH educators and management staff and an independent evaluator. Evaluation of the program was designed to provide a system of continuous feedback and quality improvement. During discussions with Valencia and ORMC personnel, it was apparent that the evaluation system worked well and Valencia was responsive to suggestions for improvements.

The space for classrooms and clinical training provided by Arnold Palmer Hospital was adequate for the operation of the program. ORMC provided back-up classroom space for programs with a large number of participants. The specialized clinical equipment used for clinical instruction was provided by APH and included state-of-the-art equipment in use at the hospital. Valencia Community College provided support through provision of audio-visual and printing equipment.

The model program developed by Valencia Community College in concert with Orlando Regional Medical Center/Arnold Palmer Hospital has been utilized by educators and managers at the hospital to refine the skills and retrain health care employees for advanced competencies in the highly specialized patient care units. This program was designed specifically to develop further vocational skills in vocationally prepared nurses. ORMC and Valencia have also promoted this program both locally and nationally as a model of an industrial-education partnership. The easy replication of this model has generated considerable interest. The records and files on this program maintained by the program director's office are complete and provide adequate documentation to support replication between other health care organizations and other educational institutions.

Information about the model has been disseminated widely. Valencia and ORMC personnel have published two articles about the project, presented a paper at the annual Florida League for Nursing meeting, and provided a poster session or speaking engagement for four national meetings. In addition, information about the program and availability of materials was sent to the Vocational Education Department in every state and to all Vocational Educational and Community College programs in Florida. The quality and need for the program is also reflected in the letter of support provided by the Florida Board of Nursing.

Respectfully submitted,

Jo Manion

Jo Manion, RN, MA, CNAA
Vice President/Center for Nursing
Florida Hospital Association

DEPARTMENT OF PROFESSIONAL REGULATION

Lawton Chiles
Governor

George Stuart
Secretary

March 12, 1991

Dr. Ruth Webb
Chairman Health and Public Services
Valencia Community College
P. O. Box 3028
Orlando, Florida 32802

Dear Dr. Webb:

The Board of Nursing reviews nursing education programs in Florida and also grants approval to providers of nursing continuing education. The Board of Nursing has direct responsibility for ensuring the quality of nursing education in Florida. It is my pleasure to write this letter of support for the "Model High Technology in Health Care Program" developed through a grant to Valencia Community College in Orlando.

This project provides a model program for offering cost-effective education to prepare nurses to deliver quality specialized nursing care. Areas of emphasis include pediatric, obstetric and neonatal nursing. The program has provided an important service to nurses, and indirectly to health care consumers in Central Florida. It has proven valuable in "bridging the gap" between original nursing education and its practical application in the clinical setting. The level of competency of nurses already in the work force is maintained and the role of other nurses is expanded.

On behalf of the Board of Nursing, thank you for your interest in providing quality education to Florida nurses.

Sincerely,

Jean T. Penny, RN, PhD, ARNP
Nursing Continuing Education Director

JTP/cg

cc: Joanne Wit
Anne Miller
Joan Tiller

DIVISION OF MEDICAL QUALITY ASSURANCE
BOARD OF NURSING
111 COASTLINE DRIVE EAST, SUITE 516 • JACKSONVILLE, FLORIDA 32202
Telephone (904) 359-6331

ATTACHMENT R

NURSING MANAGEMENT OF THE INTRAPARTUM PROCESS

Arnold Palmer Hospital for Children and Women

Valencia Community College

Health Care Demo Project
Federal Department of Education

NURJW28

GENERAL COURSE INFORMATION

Teaching - Learning Methods:

1. Lecture
2. Audio-tutorial
3. Small group discussion
4. Learning laboratory participation
5. Reading assignments
6. Clinical performance

Methods of Evaluation

1. Quizzes (to be announced)
2. Comprehensive final exam
3. Clinical performance (S/U)

Grading System

Pass/Fail

Scale

Pass - A
Fail - Withdraw

During the course, each student will be evaluated based on theory grade and clinical performance. The student will be counseled regarding the areas requiring improvement. If either area remains unsatisfactory, the student will be removed from the course and transferred to another patient care area.

Recommended Textbooks

1. Martin, E. Jean. *Intrapartum Management Modules: A Perinatal Eucation Program.* Baltimore:Williams and Wilkins., 1990.
2. Olds, Sally B., London, Marcia L., and Ladewig, Patricia A. *Maternal Newborn Nursing: A Family Centered Approach, 3rd ed.* Addison Wesley Publishing Company, 1990.

Course Objectives

Upon successful completion of this course, the nurse participant will be able to:

1. Discuss normal anatomical, physiological and emotional alterations occurring throughout perinatal process.
2. Describe current antepartum screening and testing techniques and their nursing implications.
3. Discuss individualized family centered care as it relates to the childbearing family.
4. Differentiate complications of pregnancy, including etiology, signs and symptoms, medical management, prognosis and nursing implications.
5. Identify normal as well as abnormal electronic fetal monitoring patterns and appropriate nursing interventions.
6. Discuss infection control techniques utilized in labor and delivery and the rationales for their use.
7. Describe the legal responsibilities in providing care to the perinatal patient and the documentation of such.
8. Perform and document a physical assessment of a mother in the intrapartum period.
9. Recognize pharmacological agents commonly used to treat pregnancy complications including possible side effects and nursing management.
10. Discuss analgesia/anesthesia options available during labor and/or delivery and the nursing management.
11. Identify the indications for Cesarean birth including the physiological and the psychological implications for the childbearing family.
12. Describe the non-invasive and invasive methods of hemodynamic monitoring including potential risks and nursing implications.
13. Demonstrate the ability to perform in a perinatal code and neonatal code.
14. Recognize possible complications of the patient in the immediate postpartum period and their nursing implications.
15. Explain the implications of perinatal loss upon the childbearing family and demonstrate appropriate nursing care to promote the grieving process.
16. Utilizing the nursing process, develop comprehensive, individualized nursing care plans for the childbearing family during intrapartum.

SKILLS OBJECTIVES

Upon completion of the course the nurse participant will successfully complete the competencies in the orientation summary: Labor/Delivery

1. Comply with safety and emergency procedures consistent with hospital policy.
2. Perform the duties of a unit secretary as necessary to promote patient care consistent with hospital policy and procedure.
3. Comply with personnel policies of the area of clinical assignment and the institution.
4. Comply with the philosophy, goals, and objectives of the area of clinical assignment and the institution.
5. Perform nursing procedures required by the area of clinical assignment consistent with scientific principles and hospital policy and procedure.
6. Perform unit specific nursing procedures and use equipment required by the area of clinical assignment consistent with scientific principles and hospital policy and procedure.
7. Use equipment required for implementation of patient care consistent with operating instructions, safety regulations and policy and procedure.
8. Comply with all policies and procedures and scientific principles in the administration of drugs, intravenous fluids, and blood products.
9. Documents on forms in the medical record consistent with the policy and procedure, defined standards of care, and the quality assurance program.
10. Uses resources persons and departments for patient care based on specific needs and the availability and responsibility of the resource.
11. Performs the role of primary nurse based on the needs and standards of the clinical area of assignment and hospital policy and procedure.
12. Provides nursing care consistent with unit policy and procedure to patients with the conditions listed in the summary.
13. Provides patient education with appropriate documentation, consistent with hospital policy and procedure.

FEMALE REPRODUCTIVE SYSTEM

Objectives:

Participants will be able to:

1. Describe the structures of the female pelvis.
2. State the function of the reproductive structures related to pregnancy, labor and delivery.
3. Describe the normal structure of the breasts.
4. Describe hormonal changes of the menstrual cycle.
5. Identify the nerve innovation of the pelvic cavity.

I. Female Pelvis

  A. Pelvic Divisions

  B. Boney Landmarks

II. Structures of Reproduction

  A. Pelvis

  B. Perineum

  C. External Genitalia

  D. Vagina

  E. Uterus

F. Ovaries

III. Breasts

A. Structures

B. Changes

IV. Menstrual Cycle

A. Hormones

B. Normal Cycle

CONCEPTION AND FETAL DEVELOPMENT

OBJECTIVES:

Participants will be able to:

1. Describe the developmental structure and functions of the placenta and umbilical cord during intrauterine life.
2. Summarize significant changes in growth and development of the fetus in utero.
3. Identify the vulnerable periods during which malformations of the various organ systems may occur, and describe the resulting congenital malformations.

I. Placental development

II. Placental function

III. Umbilical cord

IV. Formation of embryonic membrane

A. Amnion

B. Chorion

C. Yolk sac

D. Germ layers

1. Ectoderm

2. Mesoderm

3. Entoderm

V. Embryo and Fetal development

A. Preembryonic or ovum stage - first 14 days after fertilization. Rapid cellular multiplication

B. Embryonic stage

1. Third week gestation

2. Fourth week gestation

3. Fifth week gestation

4. Sixth week gestation

5. Seventh week gestation

6. Eighth week gestation

C. Fetal stage

1. 9 - 12 weeks gestation

2. 12 - 16 weeks gestation

3. 16 - 20 weeks gestation

4. 20 - 24 weeks gestation

5. 24 - 28 weeks gestation

6. 28 - 32 weeks gestation

7. 32 - 36 weeks gestation

8. 36 - 40 weeks gestation

CHILDBIRTH EDUCATION

OBJECTIVES:

Participants will be able to:

1. Discuss the basic goals of childbirth education.
2. Describe the types of antepartal education programs available to expectant couples and their families.
3. Compare methods of childbirth preparation.
4. Describe the breathing techniques used during each stage of labor.
5. Identify nursing measures that can assist the family to effectively utilize their childbirth preparation.

FAMILY CENTERED MATERNITY CARE

OBJECTIVES:

Participants will be able to:

1. Describe family centered care options available to the childbearing family.
2. Compare and contrast options in family centered care at APH to birthing centers.

LEGALITIES IN PERINATAL HEALTH CARE

OBJECTIVES:

Participants will be able to:

1. Describe the nurse's legal responsibilities in providing care to patients based on the Florida Nurse Practice Act.
2. Identify methods of documentation used to reflect the standards of care provided to the patient.
3. Identify the various chart forms used in the documentation of care in L & D.
4. Discuss the legal implications for documenting intrapartal nursing care.
5. Give examples of effecting communication with other healthcare providers in providing a plan of care.
6. Discuss the duty of all personnel in identifying and intervening to reduce risks of injury or adverse outcomes in patient care.
7. Discuss the nurses role in informed consent.

NORMAL LABOR AND DELIVERY

OBJECTIVES:

Participants will be able to:

A. Overview of Labor

   1. Explain the probable causes of labor onset and the premonitory signs and symptoms of labor.

   2. Identify the normal changes in uterine contractions as labor progresses.

B. Maternal and Fetal Response to Labor

   1. Identify the physiology of the mechanisms of labor.

   2. Describe the fetal positional changes that constitute the mechanisms of labor.

   3. Identify the role of the pelvis in the L & D process.

   4. Describe how the mechanism of labor relate to the normal progression of labor.

C. Admission Assessment of the Laboring Woman

   1. List subjective and objective data that the nurse needs to collect and analyze during labor and delivery.

   2. Differentiate between true and false labor.

D. Admission Assessment of the Fetus

   1. Determine fetal health by assessing gestational age, fundal height, fetal position, FHT, and fetal movement.

E. Plan nursing interventions based on stage of labor, progress and assessment data. Identify normal labor pattern for nullipara, multipara.

NORMAL LABOR AND DELIVERY

Skill Objectives:

The participant will demonstrate in the simulated lab or in the hospital setting the following skills:

Vaginal Assessment
Dilatation
Effacement
Station
Position
Status of membranes

1. Scrubbing
2. Starting IV's
3. Monitoring IV administration using pump
4. Catheterization
5. Opening sterile packs, sutures
6. Setting up unicel for delivery

NORMAL LABOR AND DELIVERY PROCESS AND STAGES

I. Critical factors in labor

   A. The Passage

      1. Types of pelves

      2. Other factors

   B. The passenger

      1. Fetal head

      2. Fetal attitude

      3. Fetal lie

4. Fetal presentation
    a. Cephalic

    b. Breech

    c. Shoulder

    d. Relationship presenting part to passage

5. Fetal position

C. The powers

1. Uterine response

D. The psyche

1. Preparation for labor

2. Coping mechanisms

3. Support systems

4. Childbirth classes

II. Physiology of labor

A. Theories

1. Oxytocin stimulation

2. Progesterone withdrawal

3. Estrogen stimulation

4. Fetal cortisol

5. Fetal membrane phospholipid-arachidonic acid-prostaglandin

B. Biochemical interaction

C. Myometrial activity

D. Intraabdominal pressure

E. Muscular changes in pelvic floor

III. Maternal systemic response to labor

A. Cardiovascular

B. Blood pressure

C. Fluid and Electrolyte

D. GI

E. Respiratory

F. Renal

G. Hemopoietic

H. Response to pain

IV. Fetal response to labor

A. HR changes

B. Acid-base

C. Fetal movement

D. Behavioral state

E. Hemodynamic

F. Positional changes

V. Premonitory signs of labor

A. Lightening

B. Braxton-Hicks

C. Cervical changes

D. Bloody show

E. Ruptured membranes

F. Burst of energy

G. Other signs

H. True vs. False labor

VI. Stages of labor

A. First stage

1. Latent phase

2. Active phase

B. Second stage

C. Third stage

D. Fourth stage

VII. Nursing interventions

A. Admission

B. First stage

1. Latent phase

2. Active phase

C. Second stage

D. Third stage

E. Fourth stage

OPERATIVE PROCEDURE

OBJECTIVES:

Participants will be able to:

1. Describe types of episiotomies, rationale for each and nursing interventions.
2. List four types of perineal lacerations.
3. List indications for forceps delivery and complications that may occur.
4. Define vacuum extraction.
5. Identify indications for a cesarean delivery, various types and nursing interventions for caring for a patient with a cesarean birth.
6. Describe the nurses role when an amniotomy is done on the patient in labor.
7. Recognize indications and nursing responsibility for the patient having a tubal ligation, D & C, circlage, intrauterine transfusion.

OBSTETRIC AND OPERATIVE PROCEDURES

I. Amniotomy

  A. Definition

  B. Advantages

  C. Nursing assessment

  D. Procedure

  E. Nursing interventions

II. Episiotomy

  A. Definition

  B. Types

    1. Midline

    2. Mediolateral

C. Procedure

D. Nursing interventions

III. Forceps

A. Indications

B. Complications

C. Prerequisites

D. Types

E. Nursing

IV. Vacuum

A. Definition

B. Indications

C. Advantages

D. Disadvantages

E. Nursing

V. Cesarean

A. Definition

B. Indications

C. Maternal mortality and morbidity

D. Surgical technique

1. Skin incision

2. Uterine incision

E. Nursing

   1. Preparation for cesarean

   2. Preparation for repeat cesarean

   3. Preparation for emergency cesarean

F. Delivery and nursing interventions

G. Anesthesia and analgesia

H. Nursing implication in fourth stage

I. VBAC

ANALGESIA AND ANESTHESIA

OBJECTIVES:

Participants will be able to:

1. Identify methods of systemic pain relief:
    a. Narcotic analgesics
    b. Opiate antagonists
    c. Sedatives

2. Differentiate between the major techniques of regional analgesia and anesthesia.

3. Identify nursing care of a woman receiving systemic pain relief vs. a woman receiving regional analgesia or anesthesia.

4. Distinguish between the actions of inhalation and IV anesthetic used to provide general anesthesia for delivery and nursing implications.

5. Discuss the nursing role when complications of regional and general anesthesia occur.

6. Define the therapeutic and physiologic actions for medications used for analgesia and anesthesia.

Skill Objectives:

The participant will demonstrate in the simulated lab or in the hospital setting the following skill:

Monitoring delivery of medication via phentonyl pump.

NORMAL NEWBORN

OBJECTIVES:

Participants will be able to:

1. Identify the physical changes that occur in the newborn during transition to extrauterine life.
2. Identify significant assessments of the newborn in the first 1-5 minutes of extrauterine life, including apgar scoring; the first two hours.
3. Identify and provide immediate care of the newborn during the first four hours of life.
4. Compare the methods of heat loss in newborns and give examples of each.
5. Give assessments that indicate heat loss.
6. Identify the periods of reactivity immediately after birth.
7. Describe the reflexes commonly observed in the newborn.
8. Describe methods for determining gestational age of newborns, including neurological criteria and physical characteristics.
9. Explain the methods of classifying the newborn as small-for-gestational age, large-for-gestational age, or appropriate-for-gestational age.

NORMAL NEWBORN

I. Adaptation to extrauterine life

  A. Respiratory

    1. Requirements

    2. Intrauterine factors

    3. Initiation

      a. Mechanical

      b. Chemical

      c. Thermal

      d. Sensory

    4. Opposing factors

B. Cardiovascular

1. Aortic pressure increases and venous pressure decreases
2. Systemic pressure and pulmonary artery pressure
3. Foramen ovale closes
4. Ductus arteriosus closes
5. Ductus venosus closes

C. Hematologic

D. Temperature

1. Heat loss
    a. Convection
    b. Conduction
    c. Radiation
    d. Evaporation

2. Thermogenesis

3. Response to heat

II. Periods of reactivity

A. First period

B. Sleep phase

C. Second period of reactivity

III. Immediate care in DR and first 4 hours

A. Maintain respirations

B. Maintain warmth

C. APGAR

1. A -

2. P -

3. G -

4. A -

5. R -

D. Cord care

E. Evaluation

F. Identification

G. Transfer to nursery

H. Neuro
  1. Moro

  2. Babinski

  3. Grasp

  4. Stepping

  5. Tonic neck

  6. Suck - swallow

  7. Sneeze

V. Gestational Age Assessment

A. Physical characteristics

B. Neurological characteristics

VI. Nursing intervention

FOURTH STAGE ASSESSMENT

OBJECTIVES:

Participants will be able to:

1. Identify and perform physiologic assessments during the first two hours of postpartum.
2. Determine interventions based on physical assessments findings.
3. Discuss factors influencing the first maternal-infant interactions.
4. Discuss, according to Rubin, the pattern of maternal behaviors that are exhibited at first contact with the newborn.
5. Describe the phases of maternal-infant interaction.
6. Contrast the factors affecting family members' interaction with the infant.

I. Physical adaptation

   A. Blood pressure

   B. Pulse

   C. Uterine fundus

   D. Lochia

   E. Bladder

   F. Perineum

III. Psychological adaptations

    A. Rubin

        1. Taking - in

        2. Taking - hold

IV. Nursing Assessment

    A. Physical

    B. Psychosocial

V. Nursing interventions

COMPLICATIONS OF LABOR AND DELIVERY

OBJECTIVES:

Participants will be able to:

A. Complications involving the powers, passenger or passageway

1. Describe and discuss two major types of dysfunctional labor patterns and their effect on the fetus.

2. List the types of malposition and malpresentation that can result in dystocia.

B. Induction and augmentation of labor

1. Discuss medical reasons for induction/augmentation.

2. Identify indications and contraindications in the administration of oxytocin.

3. Relate nursing implications in the administration of oxytocin.

4. Demonstrate safe administration of oxytocin.

5. Discuss possible complications in use of oxytocin and/or nipple stimulation.

C. Caring for the woman with PROM or preterm labor.

1. Discuss the incidences and causes of premature labor.

2. Recognize the signs and symptoms of premature labor.

3. Describe the management of premature labor, including the use of tocolytic agents and other drugs.

4. Discuss nursing priorities for the woman with PROM.

5. Identify maternal and fetal/neonatal risk with PROM.

D. Other complications

1. Discuss the theories of the causes of post dates.

2. Identify risks to the mother and fetus/neonate of postmature pregnancy.

3. Identify management of the post dates pregnancy.

4. Define complete and incomplete ruptures of the uterus.

5. Define prolapse cord and discuss nursing interventions.

6. Compare abruptio placenta and placenta previa and identify nursing interventions.

7. Describe the most common sign, contributing factors and nursing interventions for fetal distress.

8. Compare oligohydramnios and polyhydramnios and identify risks to and effects on the fetus.

9. Identify effects of multiple pregnancy on the mother.

10. Identify effects of multiple pregnancy on the fetus.

11. Discuss the pregnant woman with DIC, including causes, assessments and nursing management.

Skill Objectives

Participants will demonstrate in the simulated lab or the hospital setting the following skills:

1. Monitor the administration of terbutaline via pump to the woman in premature labor.

2. Monitor the administration of oxytocin to the labor patient to augment or induce labor.

I. Dysfunctional labor

II. Induction

   A. Definition

   B. Contraindications

   C. Labor readiness

      1. Fetal maturity

      2. Cervical readiness

   D. Oxytocin

      1. Medical treatment

      2. Nursing assessment

      3. Nursing interventions

   E. Prostaglandin

      1. Medical treatment

2. Nursing interventions

III. PROM

A. Signs and symptoms

B. Management

C. Fetal Risk

D. Nursing Implications

IV. Obstetrical Emergencies

A. S & S of Placenta Previa

B. Management

C. S & S Abruptio Placentae

D. Management

E. S & S Ruptured Uterus

F. Management

G. S & S Prolapsed Cord

H. Management

COMPLICATIONS OF PREGNANCY

OBJECTIVES:

Participants will be able to:

A. Caring for the woman at risk with pre-existing heart disease.
   1. Explain the effects of pre-existing heart disease on a pregnancy.
   2. Discuss the assessments and interventions which may be necessary during the prenatal, intrapartal, and postpartal periods of a woman with heart disease.

B. Caring for the woman with the complication of diabetes.
   1. Review and recall diabetes mellitus, the classifications and insulin administration.
   2. Explain how the metabolic and hormonal changes of pregnancy affect diabetes and its management.
   3. Identify ways in which diabetes affects pregnancy outcome.
   4. Discuss the interventions required for the pregnant woman with diabetes for the various classifications.

C. Caring for the labor patient with possible Rh hemolytic disease.
   1. Discuss the causes and prevention of Rh hemolytic disease.
   2. Identify the effect on the newborn.
   3. Relate nursing implications when the laboring woman is Rh negative.

D. Caring for the laboring woman with pregnancy induced hypertension.
   1. Describe the course and development of hypertensive disorders associated with pregnancy.
   2. Describe the nursing assessment done on a woman with PIH.
   3. Identify medical and nursing management of a woman with PIH during prenatal, intrapartal and postpartal periods.
   4. Identify medications used to treat PIH and nursing implications.
   5. Discuss the implications of HELLP; who is at risk for it.

E. Discuss the drug use and abuse during pregnancy and its affect on the fetus.

COMPLICATIONS OF PREGNANCY

Skill Objectives:

Participants will demonstrate in the simulated lab or the hospital setting the following skills:

1. Neuro assessment, particularly DTR.
2. Monitor administration of magnesium sulfate to patient with PIH.

CARDIOVASCULAR MANAGEMENT AND NURSING CARE

OUTLINE

I. GOALS OF MANAGEMENT

  A. To Prevent Congestive Heart Failure

    1. Decrease work load of the heart
      a. limited activity - to complete bedrest
      b. controlled weight gain
      c. control excessive fluid retention
        1) low salt diet
        2) elevate legs

  B. Recognize Early Signs of Congestive Heart Failure

    1. Dry cough with possibility of progressing to frothy congested cough.
    2. Chest pain.
    3. Increased respiratory rate.
    4. Lung rales or rhonchi.
    5. Increased fatigue with normal activity.

  C. To Treat Possible Causes of Tachycardia

    1. Anemia
      a. iron supplement
      b. nutritional guides
    2. Fibrile illness prevention
    3. Control arrhythmias
      a. most common are PVCs, PATs, atrial tachycardia or fibrillation.
      b. digitalis treatment ordered.
    4. Excessive exercise or activity
    5. Emotional upsets
    6. Hyperthyroid disease

II. MANAGEMENT IN LABOR

A. First State - Labor

1. Labor & deliver in same room
2. Monitors
   a. Fetal
   b. EKG
   c. Dinemap
3. Vital signs every 15min. or as indicated by patient's condition including respiratory status and breath sound evaluation.
4. Strict I&O
   a. Infusion pumps on all IV lines.
   b. Foley catheter with urometer for strict urine measurement.
5. Prophylactic antibiotics
6. Evaluate and regrade each patient in labor.
7. Semi Fowler position with left lateral displacement.
8. Sedation or epidural if indicated
9. Available drugs and equipment for possible complications.
10. O_2 per mask.
11. Swan-Ganz indicated for Class III or IV cardiac disease.

B. Second Stage - Delivery

1. Prevent bearing down.
   a. Sedation
   b. Forceps
   c. Epidural if indicated
2. Delivery in Semi Fowler position with patient's feet on chairs.
3. * no lithotomy position even if forceps applied.
4. Vaginal delivery preferred - C-Section for obstetrical indications only.

C. Third Stage - Placenta

1. Avoid post partum hemorrhage.
2. No ergotrate or methergine because of possible BP elevation.
3. Be aware of antidiuretic effects and cardiovascular effects of oxytocen.
   a. No IV push oxytocen
   b. IV drip with oxytocen - OK

D. Post Partum Stage

1. Observe in recovery room with close observation for 24 hours.
2. Continue strict I&O
3. Watch for excessive vaginal bleeding.
4. Maternal deaths occur
   a. 1/2 in first 24 hours.
   b. Up to 7 days post partum.

E. Fetal Management

1. Continuous Fetal Monitoring
2. Babies at increased risk for cardiovascular anomalies if mother has one.
3. Be on guard for fetal distress.

III. NURSING CARE MANAGEMENT

A. Alleviation of patient and family anxiety

1. Explained in understandable terminology to patient and family the equipment and monitoring devices and the need for them.
2. Family members at bedside for support.
3. Explanation of any procedures to be done.

B. Fetal Monitoring evaluations as to fetal well-being

1. Be aware of possibility of placental insufficiency and distress.
2. Possible IUGR baby.

C. EKG Knowledge

1. Basic EKG couse a must.
2. ACLS becoming more needed.
3. Be able to recognize something abnormal for this patient as labor progresses.

D. Swan-Ganz reading interpretations knowledge

1. Terminology understanding
   a. PAP - Pulmonary Artery Pressure
   b. CVP - Central Venous Pressure
   C. PCWP - Pulmonary Capillary Wedge Pressure
2. Normal Value of reading in pregnancy
   a. CVP - 5-12mm/hg
   b. PAP - 5-12mm/hg
   c. PCWP - 5-12mm/hg
   d. Cardiac Output - 6-10 liters
   e. If wedge pressure above 20 indicated pulmonary edema

E. Physical Assessment Skills

1. Lung & breath sound evaluation
2. Vital sign interpretation - Trend * is the patient getting in trouble.
3. Patient general appearance
    a. color
    b. relaxed or in distress
    c. peripheral profusion
        1) extremity pulse
        2) capillary refilling
        3) Oximeter readings

F. Blood Gas Values and their Interpretations

G. Sedation

1. Keep patient physically comfortable
2. Reduce anxiety

H. Strict I&O

1. IV pumps for IVs
2. Foley cath with urometer measuring

I. Diversional Activity - If Long Term Hospitalization Required

1. Occupational Therapy
2. Reading material
3. TV
4. Spend time talking with listening to patient.

J. Skin Integrity

1. positional changes
2. Eggcrate mattress
3. Bathing
4. Passive range of motion
5. Lotion rubs

K. Nutritional Evaulation

1. Low sodium
2. Iron supplement
3. Patient likes and dislikes
4. Increase protein and carbohydrate with low caloric intake.

PRECIPITOUS DELIVERY

Objectives

1. Recognize the signs and symptoms of a precipitous delivery.
2. Discuss the role of the nurse who may be alone at the time of delivery.
3. Describe the care of the newborn following a precipitous delivery.
4. Document appropriate information as necessary.

COMPLICATIONS OF PREGNANCY

Skill Objectives:

Participants will demonstrate in the simulated lab or the hospital setting the following skills:

1. Neuro assessment, particularly DTR.
2. Monitor administration of magnesium sulfate to patient with PIH.

PERINATAL BEREAVEMENT

OBJECTIVES:

Participants will be able to:

1. Identify signs and symptoms of spontaneous abortions/stillbirths.
2. Describe the use of prostaglandins and complications associated with its use.
3. Describe the management of abortions/stillbirths.
4. Discuss the family developmental tasks and the psychological tasks of pregnancy.
5. Discuss high risk pregnancy as a situational crisis.
6. Describe the stages involved in the grief process.
7. Discuss interventions helpful to families when coping with a high risk pregnancy.
8. Discuss interventions helpful to families when coping with a perinatal loss.

Seminar/Skills Lab

A. Triage

1. Relate the nurses responsibility in assessment of the pregnant woman in triage.

2. Describe the following assessment methods:

   a. Leopold's maneuver
   b. Vaginal Exam
   c. Fern Testing/Nitrazine
   d. Vitachek
   e. DTR's
   f. Fetal monitor application
   g. cultures

3. Relate significance of assessments made to determining the labor status of the pregnant woman.

4. In a simulated situation make nursing diagnosis from data gained from a triage assessment.

5. Demonstrate documentation in the triage setting.

B. Emergency Drugs

1. Recognize the drugs used in OB emergencies.

2. Relate where these drugs are located.

3. Describe nursing responsibilities in administering medication in an emergency situation.

C. Newborn Resuscitation

1. Describe the LDR nurse's responsibility in the spontaneous breathing newborn.

2. State the role of the LDR nurse when there is a potential or real threat to the newborn establishing normal respiration.

D. Post Anesthesia Care

1. Describe the assessment of the patient on admission to the recovery room.

2. Relate assessment and care of the patient during the recovery from anesthesia.

3. Demonstrate documentation of assessments during the recovery period.

4. Describe levels of regional anesthesia.

5. Identify equipment used in the assessment of the patient recovering from anesthesia.

    a. Pulse oximeter
    b. Phentonyl pump
    c. Merlin
    d. Dinamap
    e. EKG monitor

6. Describe nursing responsibilities when caring for the patient with high tech assessment equipment.

E. Specimen Collection

1. Identify specimens that are frequently collected in the LDR setting.

2. Describe nursing responsibilities in specimen collection.

3. Collect appropriate equipment.

4. State specific implications of specimen collection for the patient in labor.

F. Labor/Delivery Room Set-up

1. List and locate equipment in LDR.

2. Demonstrate use of labor/delivery bed, infant warmer, suction and O_2 equipment.

3. Demonstrate septic technique.

4. Set up a delivery table using proper technique.

G. Terbulatine Pump/Oxytocin Administration

1. Describe proper use of the terbutaline pump.

2. Relate nursing responsibilities when the pregnant woman is hospitalized and is receiving medication via the terbutaline pump.

3. Describe nursing responsibilities in the safe administration of oxytocin in the management of labor.

H. Electronic Fetal Monitoring

1. Identify principles related to Electronic Fetal Monitoring.

2. Define fetal heart rate variability.

3. Discuss characteristics of intrapartal FHR patterns and associated nursing care.

4. Discuss management of FHR patterns and pitocin administration.

2/91.mlh

I. Placental development

II. Placental function

III. Umbilical cord

IV. Formation of embryonic membrane

A. Amnion

B. Chorion

C. Yolk sac

D. Germ layers

  1. Ectoderm

  2. Mesoderm

  3. Entoderm

V. Embryo and Fetal development

  A. Preembryonic or ovum stage - first 14 days after fertilization. Rapid cellular multiplication

  B. Embryonic stage

    1. Third week gestation

2. Fourth week gestation

3. Fifth week gestation

4. Sixth week gestation

5. Seventh week gestation

6. Eighth week gestation

C. Fetal stage

1. 9 - 12 weeks gestation

2. 12 - 16 weeks gestation

3. 16 - 20 weeks gestation

4. 20 - 24 weeks gestation

5. 24 - 28 weeks gestation

6. 28 - 32 weeks gestation

7. 32 - 36 weeks gestation

8. 36 - 40 weeks gestation

CHILDBIRTH EDUCATION

OBJECTIVES:

Participants will be able to:

1. Discuss the basic goals of childbirth education.
2. Describe the types of antepartal education programs available to expectant couples and their families.
3. Compare methods of childbirth preparation.
4. Describe the breathing techniques used during each stage of labor.
5. Identify nursing measures that can assist the family to effectively utilize their childbirth preparation.

FAMILY CENTERED MATERNITY CARE

OBJECTIVES:

Participants will be able to:

1. Describe family centered care options available to the childbearing family.
2. Compare and contrast options in family centered care at APH to birthing centers.

LEGALITIES IN PERINATAL HEALTH CARE

OBJECTIVES:

Participants will be able to:

1. Describe the nurse's legal responsibilities in providing care to patients based on the Florida Nurse Practice Act.
2. Identify methods of documentation used to reflect the standards of care provided to the patient.
3. Identify the various chart forms used in the documentation of care in L & D.
4. Discuss the legal implications for documenting intrapartal nursing care.
5. Give examples of effecting communication with other healthcare providers in providing a plan of care.
6. Discuss the duty of all personnel in identifying and intervening to reduce risks of injury or adverse outcomes in patient care.
7. Discuss the nurses role in informed consent.

NORMAL LABOR AND DELIVERY

OBJECTIVES:

Participants will be able to:

A. Overview of Labor

1. Explain the probable causes of labor onset and the premonitory signs and symptoms of labor.

2. Identify the normal changes in uterine contractions as labor progresses.

B. Maternal and Fetal Response to Labor

1. Identify the physiology of the mechanisms of labor.

2. Describe the fetal positional changes that constitute the mechanisms of labor.

3. Identify the role of the pelvis in the L & D process.

4. Describe how the mechanism of labor relate to the normal progression of labor.

C. Admission Assessment of the Laboring Woman

1. List subjective and objective data that the nurse needs to collect and analyze during labor and delivery.

2. Differentiate between true and false labor.

D. Admission Assessment of the Fetus

1. Determine fetal health by assessing gestational age, fundal height, fetal position, FHT, and fetal movement.

E. Plan nursing interventions based on stage of labor, progress and assessment data. Identify normal labor pattern for nullipara, multipara.

NORMAL LABOR AND DELIVERY

Skill Objectives:

The participant will demonstrate in the simulated lab or in the hospital setting the following skills:

Vaginal Assessment
Dilatation
Effacement
Station
Position
Status of membranes

1. Scrubbing
2. Starting IV's
3. Monitoring IV administration using pump
4. Catheterization
5. Opening sterile packs, sutures
6. Setting up unicel for delivery